United States Department of Health & Human Services

HHS Records Management Program (RMP)

Annual Evaluation
January – December 2010

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 December 31, 2010

Table of Contents

1 Executive Summary

Federal agencies are required to periodically evaluate their records management programs. This is the fourth annual Department of Health and Human Services (HHS) evaluation of its records management program (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 (STAFFDIVs) are considered to be an operating division. The Department's RMP is located in the HHS Office of the Chief Information Officer (HHS CIO).

1.1 HHS RMP high-level initiatives and accomplishments in 2010:

- Scheduled 97% of its electronic systems (see Appendix D) – in accordance with National Archives and Records Administration (NARA) and Office of Management and Budget (OMB) requirements established under the E-Government Act of 2002, HHS submitted electronic system inventories and records disposition schedules to NARA;
- Identified that none of the OPDIVS use electronic mail recordkeeping systems – in accordance with the proposed *Electronic Message Preservation Act* (H.R. 1387), OMB instructed agencies to identify the use of electronic mail recordkeeping systems. The HHS records officer (RO) coordinated with the HHS CIOs, HHS Program Support Center (PSC) Information Technology (IT) functions, and OPDIV records officers the responses to the OMB questionnaire and the HHS RO submitted a consolidated response to the HHS CIO for submission to OMB;
- Completed 100% of the second annual NARA evaluation of Federal records management programs, where the focus was on agency records management training programs;
- Established and revised information management policies and processes and posted to HHS OpenGov and HHS CIO websites (http://www.hhs.gov/open/records/index.html and http://www.hhs.gov/ocio/policy/recordsmanagement/index.html);
- Supported HHS Office of General Counsel (OGC) in the implementation of extensive litigation holds on Affordable Care Act (ACA) and Deepwater Horizon matters;
- Collaborated with the HHS Web Manager in the office of the Assistant Secretary for Public Affairs (ASPA) on the identification of Federal records in a social media environment and the management of these records;
- Established a Department-wide mandatory on-line records management course, where approximately 80,000 employees were required to take the course by December 31, 2010.

1.2 Stovepipes or gaps identified in the 2009 HHS RMP annual evaluation that were resolved in 2010:

- Improved Government communication to the public: established a direct link to HHS records management policy and operations information on the HHS Open Government website and conduct a periodic review to ensure that the information is accurate and up-to-date (http://www.hhs.gov/open/records/index.html);
- Incorporated records management in Enterprise Architecture (EA) process – incorporated data disposition instructions within the EA framework;

- Established an OS-wide framework of records management staff: In November 2009, an HHS OS reorganization included the creation of the offices of the Assistant Secretary for Financial Resources (ASFR) and the Assistant Secretary for Administration (ASA), placement of the office of the Department's Chief Information Officer (CIO) in ASA, closure of the Office of the Secretary Executive Office (OSEO), transfer of the Office of the Secretary records management program from OSEO to the office of the CIO, and the designation of records managers in HHS OS staff divisions (STAFFDIVS);
- Filled vacant OPDIV records officer positions in the Indian Health Service (IHS), the National Institutes of Health (NIH), and the Substance Abuse & Mental Health Services Administration (SAMHSA);
- Developed and validated file plans for more than 240 offices in the Offices of the Secretary (see Section 2.10 and Appendix E); and
- Improved internal communication:

  o Improved legal hold communications – collaboration between HHS RO, HHS Chief Information Officer (CIO), and HHS OGC communities;
  o Developed and distributed records management guidance document and briefed new Schedule C employees, Senior Executive Service staff, and new HHS personnel – collaboration between HHS OGC, ASA, HHS White House Liaison Office, and HHS RO;
  o HHS Records Management Council (RMC) and OS RMC held regular meetings, routinely distributed records management information from NARA, and provided extensive advice and guidance to OPDIV records officers and STAFFDIV records managers;
  o Negotiated with Office of the Secretary and NARA the process for scheduling the permanent records of the Secretary and the transfer of these records to the National Archives; and
  o HHS RO established communication and coordination with the new HHS Continuity of Operations (COOP) official within the office of the Assistant Secretary for Preparedness and Response (ASPR)

1.3 Areas for further improvements to the HHS records management program include:

- Assignment of records management support duties to designated personnel (i.e., records liaisons and co-liaisons) in certain OPDIVS and STAFFDIVS;
- Enhancement of HHS IT policy and federated IT operations in such area as back-up procedures, security, enterprise architecture, workflow and document management, and system lifecycle management;
- Creation and maintenance of HHS information for the web (including social media/third-party provider tools such as Facebook, wikis, and blogs) and coordination between HHS content owners, website managers, and records managers;

- Coordination with Privacy Act (PA) and the Paperwork Reduction Act (PRA) officials in the establishment of personally identifiable information records creation and maintenance processes and procedures;
- Coordination with HHS Freedom of Information Act (FOIA) officials in the establishment of processes and procedures for record holds;
- Creation and maintenance by OGC of consistent procedural steps for legal holds; and
- Incorporate in the Department's emergency operating and incident response processes and procedures the identification and management of vital records

The HHS RMP continues to establish standard operating procedures to information management across HHS and to incorporate records management policies and procedures in accordance with such Federal laws and requirements as the Federal Records Act, Federal Rules of Civil Procedure (FRCP), Federal Information Security Management Act (FISMA), E-Government Act of 2002, Privacy Act, and the Freedom of Information Act (FOIA). Additional Federal records and information management requirements are listed in Appendix A.

1.4 Scope of this Report

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. This assessment covers the period January 2010 to December 2010 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 2010, and a listing of future initiatives. 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.

2 HHS Department Records Management Program Overview and Summary of Accomplishments

2.1 Background

The HHS Department Records Officer (HHS RO) position is located in the Office of the Chief Information Officer (OCIO), Office of Resources Management (ORM), within the Office of the Assistant Secretary for Administration (ASA). The RO develops and implements information management policies, procedures, and training materials, 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 (HHS RMC), the OS Records Management Council (OS RMC), the Director of Resources Management, the Chief Information Officer, and the Office of the Assistant Secretary for Administration (ASA).

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 activities.

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 were:

- 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.

These objectives were accomplished in late 2009 and early 2010. However, these are not stagnant and the HHS RMP continues to update and maintain these objectives. The 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 Offices of the Secretary, in their current and future (envisioned) state. In 2010, the RM business process models were completed and data elements for electronic records disposition are on schedule for integration in the HHS CIO Enterprise Architecture repository.

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. The Records Management Gap Priority Table is contained in Appendix B of this assessment.

2.2 HHS Records Ownership and Storage

NARA assigns a numerical identifier, known as a 'record group number,' to the records of each major government entity. Some government agencies have more than one record group number assigned by NARA, depending on administrative or functional organization of the Government. 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. The names of the HHS OPDIV Records Officers, the name of each OPDIV, and the assigned record group numbers are in Table 1.

Table 1 HHS OPDIV Records Officers and Record Group Numbers

Records Officer Name	Operating Division	RG	Work Centers
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	4
Patricia Bosco	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
Christopher Forney	Indian Health Service (IHS)	513, 90	23
Kimberly Johnson	National Institute of Health (NIH)	433	27
Elaine Pankey	Office of Secretary (OS) – all OS Staff Divisions	468, 235, 514, 90, 998*	17
Jeanellen Kallevang	Substance Abuse & Mental Health Services Administration (SAMHSA)	511, 90	7

This is a temporary record group number assigned by the National Archives and Records Administration (NARA) to the ASA Program Support Center (PSC). The assignment was made at the request of the Department as a result of a 1995 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 (FRC) operated by NARA. 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 approved by the Archivist of the United States. The Archivist is the agency head of 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.

2.3   Summary of Calendar Year 2010 Accomplishments:

i.   **Government-wide Mandates**
   a.   100% HHS response rate to a Government Accountability Office (GAO) and NARA evaluation of Federal electronic records scheduling – based on a NARA-developed risk-identification methodology, HHS scored 77 out of 100 points. See Appendix C for the HHS risk scores.
   b.   100% HHS response rate to a NARA evaluation of Federal records management training programs – NARA's analyses of the results are pending approval by OMB before public issuance.
   c.   Submitted to OMB and NARA E-Government Act of 2002 reports of scheduled and unscheduled records in electronic systems, with the following information:
      o   Inventoried 1605 HHS systems in 2010 (see Appendix D)
      o   Continued to maintain a 97% HHS systems scheduling rate
      o   Submitted project plans to NARA for the remaining 3% of HHS systems
      o   Wrote electronic records scheduling status and methodology for accomplishing the scheduling requirement on the HHS CIO FISMA report
   d.   Responded to NARA's private vendor Records Facilities Reporting Requirements (36 C.F.R. 1234) – CMS submitted private vendor reports and in 2011 NARA intends to inspect the CMS contractor-run records storage facility located in Kansas City, Missouri. See Appendix F for HHS records storage costs.
   e.   The HHS RO supported the HHS Office of General Counsel and the Department of Justice by drafting and distributing legal hold notices to HHS records managers, the HHS Chief Information Officer Council, and program officials, relating to the Affordable Care Act and the Deepwater Horizon litigation.
   f.   Selected in November 2010 by OMB and NARA to use the NARA ERA system for the purpose of scheduling records and transferring permanent records to the custody of NARA. By FY2012, the Government-wide use of ERA is expected to be mandatory.

ii.   **HHS Records Management Policy and Processes**
   a.   The HHS RO worked with the HHS CIO Enterprise Architecture (EA) function on the development of a records management requirements model and provided the documentation needed to incorporate data disposition information in the EA

repository. NARA-approved disposition authorities for records in unique HHS mission critical systems and in administrative systems will be entered in the EA repository. The purpose of this is to allow a more accurate and timely analysis of scheduled and unscheduled records in the systems of HHS and to report these findings on a semi-annual basis to NARA and on an annual basis to OMB. Once all data has been entered in the EA repository, IT systems owners, architects, and record officers will be able to run reports to view IT Systems scheduling status and related details.

b. Incorporated records management requirements in new and revised HHS CIO and ASPA policies and processes, including privacy policies and social media records management.

c. The HHS RO and the HHS OS RO continued to hold quarterly OPDIV and STAFFDIV Records Management Council meetings. OPDIV records officers continued to hold periodic meetings with their records managers.

d. HHS RO completed the draft HHS Policy for Records Holds, incorporating clarifications received from the Department of Justice, HHS Office of Inspector General, and HHS Acting General Counsel.

e. HHS RO and the HHS OS RO provided support in the establishment of records management programs in the Office of Consumer Information and Insurance Oversight (OCIIO) and the Community Living Assistance Services and Supports (CLASS) program, new functions created under the Affordable Care Act prior to the transfer of these functions to CMS and AoA.

iii. **Inventories and Evaluations**

a. Completed per the Federal Records Act, a periodic Department-wide Records Management Evaluation. The Department of Health and Human Services conducts an annual Department-wide evaluation.

b. Completed an OS-wide inventory/files plan validation project across all 18 STAFFDIVS – the HHS OS Records Officer and the OS records management program completed the identification of RM deficiencies and mapped records to valid records disposal authorities in the HHS OS Records Management Handbook and the GRS. This was identified as Phase I of the OS records management project. Phase II will be a three-year project that will consist of the scheduling of unscheduled records and rescheduling out-of-date scheduled records.

c. Hurricane Katrina patient medical records – the HHS RO and the records manager of the Assistant Secretary for Preparedness and Response (ASPR) negotiated with NARA an interagency agreement for the inventorying, boxing and transfer of Hurricane Katrina patient medical records from HHS rented space to NARA federal records center storage.

iv. **Training**

a. Mandatory on-line records management awareness training: the HHS RO worked with HHS University on making the NARA *Records Management for Everyone* course 508-compliant and on issuing the mandatory on-line training to all HHS employees. The deadline for Department-wide completion by approximately 80,000 employees is December 31, 2010.

b. At the request of the HHS OGC, the HHS RO and the Department of Justice (DOJ) litigation discovery expert briefed approximately 80 HHS OGC labor and

employment law attorneys about discovery readiness, information management, and lessons learned from working on large litigation matters.

c. Conducted RM training in weekly HHS New Employee Orientation sessions: with the passage of the Affordable Care Act, the HHS RO and HHS OS Deputy RO gave records management presentations to approximately 1,000 new employees.

d. Records Scheduling Workshop: HHS and NARA signed an $11,500 interagency agreement for two 2-day records scheduling workshops to be held in March and July of calendar year 2011. To support the HHS OS Records Management Handbook update project (Phase II as mentioned in point iii.b. above), the training will be mandatory for HHS OS STAFFDIV records managers.

3 HHS Records Officer Self-Assessments

3.1 Administration for Children and Families (ACF)

Records Officer: Douglas Johnson

3.1.1 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.

3.1.2 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. ACF consists of 15 separate and unique work centers that generate records:

ACF Organization Chart

- 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
- Office of Child Care

3.1.3 ACF Records Management Accomplishments in 2010

File Plan Validation:
- Resumed reviewed of ACF records schedules
- Requested program offices 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 - resumed)

Records Disposition:
- Conducted assessments of records boxes approved for disposition and held in ACF in-house storage rooms
- Arranged for pickup and NARA storage of 218 boxes

Electronic Records Schedules:
- Elicited the assistance of the ACF CIO to contact program offices and provide guidance on ACF electronic systems
- Facilitated several meetings between ACF program offices, the HHS records officer and NARA appraisal archivists to draft, review, finalize and submit schedules
- To date, the following electronic systems have been submitted and scheduled:
  - Grants Administration Tracking and Evaluation System (GATES)
  - Program Announcement Template System (PATS)
  - Office of Head Start Monitoring System (OHSMS)
  - Child and Family Services Reviews (CFSR)
- The following electronic systems have been submitted and are pending NARA approval:
  - ACF Internet/Intranet
  - Early Childhood Learning and Knowledge Center (ECKLC - website)
  - Trafficking Victims Tracking System (TVTS)
  - Federal Case Registry
  - National Directory of New Hires (NDNH)

Assessments:
- Completed and submitted to the Department RO the 2010 E-Records Scheduling Status Report
- Completed and submitted the 2nd Annual NARA Self-Assessment Survey

3.1.4 ACF Future Records Management Initiatives
- Complete and submit remaining electronic systems schedules
- Continue dialog with program offices to evaluate and update current records schedules
- Work to make ACF records schedules intranet-accessible (web request has been submitted HHS ITIO to post link to post link to NARA's ACF Records Schedules page)
- Solicit buy-in from upper-level management and IT to build a solid records management program
- Conduct several small informal records information sessions
- Encourage training for all records liaisons
- Continue to work with the Department to improve the ACF records program

3.2   Administration on Aging (AoA)
Records Officer: Harry Posman

3.2.1   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.

3.2.2   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 four centers with 20 offices in the Agency headquarters and nine regional offices generating records.

AoA organization chart

- Assistant Secretary for Aging
  - Office of Community Living Assistance Services & Supports
  - Congressional and Public Affairs
  - National Long-Term Care Ombudsman
- Principal Deputy Assistant Secretary
  - Executive Secretariat
  - Regional Support Centers
- Center for Policy, Planning and Evaluation
  - Office of Program Innovation and Demonstration
  - Office of Performance and Evaluation
  - Office of Policy Analysis and Development
- Center for Program Operations
  - Office of Home and Community-Based Service
  - Office of Elder Rights
  - Office of Outreach and Consumer Information
  - Office of American Indian, Alaskan Native and Native Hawaiian Programs
- Center for Management and Budget
  - Office of Budget and Finance
  - Office of Grants Management
  - Office of Administration Personnel
  - Office of Information Resources Management

3.2.3   AoA Records Management Accomplishments in 2010

- Revised draft records schedules submitted to NARA in 2009 in response to comments resulting from appraisal visits by NARA staff.
- Received Archivist sign-off on six of seven disposition schedules submitted for approval.

- Transferred public use electronic data files for 2003, 2004, 2005 and 2008 under N1-439-09-4, Item 7.
- Initiated mandatory Records Management training requirement "Records Management for all Employees"
- Convened AoA Records Management Working Group consisting of liaisons from each center to review existing schedules and evaluate them for potential revisions necessary to align the schedules with the Agency reorganization.
- 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.
- Conveyed records management responsibilities of contractors to AOA procurement staff.
- Completed and submitted the 2nd Annual NARA and GAO Mandatory Self-Assessment.

3.2.4   AoA Future Records Management Initiatives

- Minor pen and ink changes to recently approved schedules to align with agency reorganization.
- Continue with the transfer of permanent (historical) records to the National Archives.

3.3   Agency for Healthcare Research and Quality (AHRQ)

Records Officer: Patricia Bosco

3.3.1   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.

3.3.2 AHRQ Records Officer Position

One FTE has been assigned the records officer duties as an additional duty. Nine separate and unique work centers generate 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)

3.3.3 AHRQ Records Management Accomplishments in 2010

- Completed and submitted the 2nd Annual NARA and GAO Mandatory Self-Assessment
- Hired a contractor to inventory AHRQ records and to draft records disposition schedules with the goal of updating the AHRQ records handbook
- Involved upper management in the AHRQ records management program to enhance its level of importance
- Scheduled in-house records management awareness training for all staff especially upper management

3.3.4 AHRQ Future Records Management Initiatives

- Work with NARA appraisal archivist to update AHRQ's records disposition schedules based on new files plan
- 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

3.4   Center for Disease Control and Prevention (CDC)

Records Officer: Mark K. Wilson

3.4.1 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
- provide leadership and training

3.4.2 CDC Records Officer Position

CDC Records Management program is located in Management Analysis and Services Office (MASO), Management Assessment Branch. Led by the CDC records officer, the CDC Records Management team consists of four FTEs. In addition, there are fifty-four senior records liaisons assigned throughout CDC.   The Records Management team also 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 substance.

CDC organization chart

- Office of the Director
    - Office of the Chief Information Officer
    - Office of the Chief of Staff
    - Office of Diversity Management and Equal Employment Opportunity
    - Office of the Associate Director for Program
    - Office of the Associate Director for Science
    - Office of the Associate Director for Communication
    - Office of the Associate Director for Policy
- Office of Public Health Preparedness and Response
- Office of State, Tribal, Local and Territorial Support
- National Institute for Occupational Safety and Health
- Office of Surveillance, Epidemiology and Laboratory Services
    - National Center for Health Statistics
    - Laboratory Science Policy and Practice Program Office
    - Public Health Informatics and Technology Program Office
    - Public Health Surveillance Program Office
    - Epidemiology and Analysis Program Office
    - Scientific Education and Professional Developmental Office
- Office of Noncommunicable Diseases Injury and Environmental Health
    - National Center on Birth Defects and Developmental Disabilities
    - National Center for Chronic Disease Prevention and Health Promotion
    - National Center for Environmental Health/Agency for Toxic Substances and Disease Registry
    - National Center for Injury Prevention and Control
- Office of Infectious Diseases
    - National Center for Immunization and Respiratory Diseases
    - National Center for Emerging and Zoonotic Infectious Diseases
    - National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention
- Center for Global Health

3.4.3   CDC Accomplishments

- Developed and implemented a vital records program webpage and training tutorials for senior records liaisons, IT, management officials and CDC/ATSDR employees.
- Consolidated records management standard operating procedures (SOPs) and developed training tutorials for each.
- Inventoried and scheduled 131 new electronic systems.
- Developed an external records management website, which is being vetted through the internal review process.
- Automated the records control schedules to enhance search capabilities.
- Assisted with the development of file plans throughout CDC/ATSDR.
- Member of CDC SharePoint Governance committee.
- Chair of CDC SharePoint Governance subcommittee on records management.
- Developed CDC Enterprise Performance Lifecycle (EPLC) Records Management Critical Partner manual.
- Partnered with CDC COOP team to assist with the identification and management of vital records throughout CDC/ATSDR.
- Provided several training opportunities either online or classroom on a variety of records management subjects: offsite storage budget, Federal Records Management certification, email management, file plan, senior records liaison duties, records retirement, and other records training.
- Updated the Unified Process Guide.
- Collaborated with Atlanta Human Resource Center to present records management at new employee orientation.

3.4.4   CDC Future Records Management Initiatives

- Continue to enhance records management database to include the full lifecycle management of records.
- Collaborate with FOIA to provide support.
- Update all records management policies.
- Collaborate with Capital Planning and Investment Control (CPIC) in linking the Enterprise System Catalogue (ESC) to Records Management database to facilitate better data management.
- Update current online training tutorials to a more interactive training modules.
- Develop an internal records management certification program for senior records liaisons.

3.5   Centers for Medicare & Medicaid Services (CMS)

Records Officer: Vickie Robey

3.5.1   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 34 Centers/Offices/Consortia (20 Headquarters, 4 Consortia, 10 Regional Offices). Organizational list of CMS entities:

- Office of the Administrator & Principal Deputy Administrator
- Chief Operating Officer
    - Office of Acquisitions and Grants Management
    - Office of E-Health standards and Services
    - Office of Financial Management
    - Office of Information Services
    - Office of Operations Management
- Center for Medicare
    - Center for Medicare Management
    - Center for Drug and Health Plan Choice
- Center for Program Integrity
- Center for Strategic Planning
    - Office of Research, Development, and Information
    - Office of Policy
- Office of the Actuary
- Office of Clinical Standards & Quality
- Office of External Affairs & Beneficiary Services
- Office of Equal Opportunity and Civil Rights
- Office of Legislation
- Office of Strategic Operations and Regulatory Affairs
- Consortium for Financial Management and FFS Operations
- Consortium for Medicaid and Children's Health Operations
- Consortium for Medicare Health Plans Operations
- Consortium for Quality Improvement and S&C Operations
- 10 Regional Offices (Atlanta, Boston, Chicago, Dallas, Denver, Kansas City, New York, Philadelphia, San Francisco, Seattle). Within each regional office, there are four functional areas (financial management and fee-for-service, Medicaid & children's health, Medicare health plans, quality improvement & survey and certification) that report to their respective Consortium.

3.5.2   CMS Records Officer Position

The records management function is located in the Office of Strategic Operations and Regulatory Affairs, Issuances and Records Management Group. There are three FTEs assigned to the records management function (Records Officer, Vital Records Coordinator, and a recent transfer that is being trained as a records management specialist). There is also an alternate who serves as backup to the CMS Records Officer in addition to performing full-time duties for another function within IRMG.

3.5.3   CMS Records Management Accomplishments in 2010

- Met the E-Government Act of 2002 and related OMB mandate and to schedule all agency electronic information systems.
- Completed the HHS Electronic Records Management Inventory Project. Identified all agency electronic systems. Developed 17 e-Record Schedules to establish disposition covers the Agency's 282 electronic information systems.

- Implemented eight new schedules once approved by the National Archives and Records Administration
- Developed several records management & information pamphlets/brochures for distribution to Senior Executive Staff and CMS employees
- Obtained six NARA certifications for commercial storage facilities to house Medicare contractor records.
- In conjunction with the Open.gov initiative, posted the agency's records schedule on CMS' external website.
- 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 Liaison personnel
- Obtained contractual support to develop a web-based records management manual that addresses all of records management policy and procedures that are unique to the Department and CMS.
- Successfully conducted 45 file surveys to reduce the amount of file cabinets in current office space which helped to create additional work space for new hires coming on board in CMS by 12/31/10 for the Affordable Care Act initiative.

Records Management Training:
- Continued with the education campaign to provide to all employees their records management responsibilities and the importance to maintain awareness of what is considered a Federal record. All employees must complete the annual on-line records management training.
- 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

Special Projects:
- Utilized the current Interagency Agreement with NARA to continue the FOIA imaging project with the Federal Record Center (FRC) in Fort Worth, TX. Approximately 4,252 FOIA cases will be converted from paper to an electronic medium.
- Provided records management briefings to senior leaders at various leadership meetings
- Securing a records management solution for the electronic information system that maintains the agency's high-level correspondence.

Vital Records Program Accomplishments:
- CMS Vital Records Program (VRP) 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.
- The VRP is evaluated during the annual COOP exercises and a risk assessment was conducted by an outside agency that specialized in emergency preparedness
- Completed a records recovery plan to enable the continuation of essential agency functions by restoring or recovering vital records, systems or databases.
- Visited new COOP site and began planning for the transition. Working on integrating vital records into an all-electronic COOP website.

3.5.4   CMS Future Records Management Initiatives

- Continue to work with the components to identify and schedule new program areas records and new 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
- Work with CMS contract staff to include records management regulations in all agency contracts, statement of works, etc.
- Establish a web-based records management manual that addresses all of records management policy and procedures that are unique to the Department and CMS.
- 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

3.6   Food and Drug Administration (FDA)

Records Officer: Seung Ja Sinatra

3.6.1   FDA Business Description

The FDA is responsible for protecting 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. The Records Management Program ensures that FDA records are managed in compliance with Federal records management laws and regulations. The program is located in the Office of Information Management within the Office of the Commissioner.

3.6.2   FDA Records Officer Position

One FTE has been assigned Records Officer duties. An Assistant Records Liaison Officer (ARLO) has been assigned to record management duties at a Center/Office level. Below is an organization list showing nine separate Centers and Offices maintaining records.

FDA Centers/Offices:
- Center for Biologics Evaluation and Research (CBER), 9 Offices and 22 Divisions
- Center for Drug Evaluation and Research (CDER), 28 Offices and 73 Divisions

- Center for Devices and Radiological Health (CDRH), 8 Offices and 30 Divisions
- Center for Food Safety and Applied Nutrition (CFSAN), 10 Offices and 22 Divisions
- Center for Veterinary Medicine (CVM), 5 Offices and 12 Divisions
- Center for Tobacco Products (CTP), 5 Offices
- National Center for Toxicological Research (NCTR), 5 offices and 6 Divisions
- Office of the Commissioner (OC), 49 Offices and 28 Divisions
- Office of Regulatory Affairs (ORA), Headquarters--6 Offices and 13 Divisions; Field Offices--5 Regions, 21 District Offices, 5 Laboratories

3.6.3 FDA Accomplishments in FY 2010

Records Schedules Approved by NARA:
- Center for Food Safety and Applied Nutrition (CFSAN)
- Center for Veterinary Medicine (CVM)
- Agency-wide Schedules: Planning and Policy, User Fee Files, Emergency Operations Files.

Partial Freeze Lift:
Lifted a records freeze for non-tobacco related records by thoroughly reviewing and identifying FDA's records series that do not contain tobacco information.

Records Management Training:
- Monitored the completion rate of the HHS mandatory Records Management Training, providing an alternate format for contractors, fellows, and interns;
- In addition to offering training sessions to various FDA offices, provided e-mail training to all employees, contractors, and interns;
- Some centers, such as CVM, have incorporated records management training classes as part of the Center's formal education program; and Centers such as CDRH distributed records management Newsletters on a regular basis.

Special Projects:
- Enterprise Performance Life Cycle: The FDA records officer served as a critical partner for Records Management as part of the FDA IT Enterprise Performance Life Cycle (EPLC) Process, establishing 13 document types to be reviewed by records management critical partners at various IT system development stages. The FDA records officer reviewed various documents at different EPLC stages for over 13 systems and provided comments to project managers to incorporate records management controls.
- cEDR Project: Participated in the common Electronic Document Room (cEDR) Project, an enterprise electronic recordkeeping system which is compliant with DOD standard 5015.2; worked on records management requirements and taxonomy; participated in the taxonomy testing sessions.
- Records Storage Assessment Study: Reviewed the current records storage assessment study report within FDA and discussed future requirements.

Records Disposition Activities:
- Interagency Agreement (IAA) with the National Archives (NARA): Reviewed NARA invoices and FY2011 Interagency Agreement for records storage and services for correct billing; facilitated reimbursement of NARA fees from FDA Centers/Offices to the Central Fund.

- In FY 2010, FDA has processed 93 SF 135s (Records Transmittal form) and transferred 4,882 cu. ft. (records boxes) of inactive records to Federal Records Centers.

Self Assessment:

In coordination with the Assistant Records Liaison Officers in Centers/Offices, completed and submitted the 2nd Annual NARA Mandatory Self-Assessment in a timely manner.

Personnel:
- Facilitated the hiring of the Assistant Records Liaison Officers for the Office of Regulatory Affairs and for the Center for Tobacco Products.
- Designated the Assistant Records Liaison Officer (ARLO) for the Office of the Commissioner: Designated Records Contacts for 26 Offices within the Office of the Commissioner to improve their records management practices.

3.6.4   FDA Records Management Initiatives for CY 2011

- Establish the records Management Program within the newly created Center for Tobacco Products.
- Offer systematic training sessions for OC offices.
- Fully implement the Vital Records Management Program.
- Develop and obtain approval of New Records Control Schedules for the Center for Tobacco Products (CTP) as new records are identified; facilitate speedy appraisal and approval of the remaining SF 115s, "Request for Records Disposition Authority" at NARA, which includes Web records schedules.
- Reduce records storage costs: Review "FRC 01" reports, identify records which reached their disposition dates and do not contain tobacco information, transfer permanent records to NARA and dispose of temporary records.

3.7   Health Resources & Services Administration (HRSA)

Records Officer: Angela Tuscani

3.7.1   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 responsible for improving access to health care services for people who are uninsured, isolated or medically vulnerable. Comprised of six bureaus and 9 offices, HRSA provides leadership and financial support to health care providers in every state and U.S. territory. HRSA grantees provide health care to uninsured people, people living with HIV/AIDS, and pregnant women, mothers and children. In addition HRSA programs train health professionals and improve systems of care in rural communities. HRSA oversees organ, bone marrow and cord blood donation. HRSA supports programs that prepare against bioterrorism, compensates individuals harmed by vaccination, and maintains databases that protect against health care malpractice and health care waste, fraud and abuse.

3.7.2   HRSA Records Officer Position

The Records Management Program is located in the Office of Management/Division of Policy Information and Coordination.   The HRSA Records Management Officer (RMO) provides

management support and oversight of records policy and procedures, ensures compliance, and provides outreach and guidance to all HRSA Bureaus and Offices.

One FTE has been assigned to the Records Management program. In addition, HRSA has 18 Records Management Liaisons who work with the RMO to provide records management services to the respective Offices and Bureaus. Below is HRSA's organization chart displaying 16 separate and unique Offices and Bureaus that generate records.

HRSA organization chart
- Office of the Administrator
- Bureau of Primary Health care
- Maternal and Child Health Bureau
- Bureau of Health Professors
- Office of Rural Health Policy
- Healthcare Systems Bureau
- HIV/AIDS Bureau
- Bureau of Clinician Recruitment and Service
- Office of Communication
- Office of Legislation
- Office of Operations
- Office of Federal Assistance Management
- Office of Health Affairs
- Office of Regional Operations
- Office of Equal Opportunity, Civil Rights and Diversity Management
- Office of Planning Analysis and Evaluation

3.7.3   HRSA Accomplishments
- Managed the transfer of 332 boxes of records to the Washington National Records Center (WNRC) for storage. In addition, 203 boxes were disposed of by the WNRC;
- Coordinated the transfer of HRSA's permanent electronic records pertaining to the National Sample Survey of Registered Nurses to the National Archives, as requested by NARA for the years 2004 and 2008;
- Served as the representative for HRSA at the HHS Records Officers OPDIV Meetings;
- Provided content management services including records documentation, links, and policy and procedures for posting on HRSA Intranet;
- Prepared a policy/procedures document for the Transfer, Withdrawal and Destruction of Records at the Washington National Records Center; and
- Completed the annual NARA Electronic Records Scheduling Report and Records Management Self Assessment.

3.7.4   HRSA Future Initiatives
- Continue with the scheduling of Electronic Records Information Systems;
- Supply all updates, bulletins and notices regarding records management to the appropriate staff within HRSA;
- Continue with the transfer of permanent (historical) records to the National Archives;
- Update the HRSA Records Control Schedule;
- Draft Record Management procedures for new and exiting employees; and

- Collaborate with HRSA's Office of Emergency Preparedness and Continuity of Operations to review HRSA's vital records program.

3.8 Indian Health Service (IHS)

Records Officer: Christopher Forney

3.8.1 IHS Business Description

The Indian Health Service (IHS) is responsible for providing a broad range of health services to approximately 1.9 million American Indians and Alaska Natives who belong to 564 federally recognized tribes in 35 states. The delivery of health services to members of federally-recognized tribes emanates from the unique 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 credence based upon numerous treaties, Supreme Court decisions, legislation, Executive Orders, and the United States Constitution. As the cardinal federal health care provider and health advocate for Indian people, IHS' goal is to raise their physical, mental, social, and spiritual health to the highest possible level.

3.8.2 IHS Records Officer Position

The records management function is located in the Office of Management Services, Division of Administrative Services (DAS). One full-time equivalent (FTE) is responsible for developing, planning, and directing the IHS-wide records management program. Another FTE spends approximately 20% percent of their time assisting the RMO.

The IHS has 12 Area Offices throughout the United States and each Area Office has a designated Area Records Management Officer. Each Area Records Management Officer 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. An organizational chart depicting 22 offices generating records is below.

IHS organization chart

Office of Tribal Self-Governance
Office of Direct Service and Contracting Tribes
Office of Urban Indian Health Programs
Office of Clinical and Preventive Services
Office of Information Technology
Office of Public Health Support
Office of Resource Access and Partnerships
Office of Finance and Accounting
Office of Management Services
Office of Environmental Health and Engineering

3.8.3 IHS Records Management Accomplishments in 2010

- After an extended search, the agency was successful in hiring a full-time RMO in FY2010.

- Assisted with the rollout of the HHS online records management course titled **HHS Records Management for All Employees** at IHS headquarters and its 12 area offices.
- Completed and submitted the annual NARA Self-Assessment.

3.8.4   IHS Records Management Initiatives for Calendar Year 2011

- Anticipated revision of Indian Health Service Records Disposition Schedule to schedule unscheduled records and out-of-date records disposition instructions
- Scheduling of electronic systems
- Scheduled revision of records management policies and procedures as reflected in the Indian Health Manual, Part 5, Chapter 15
- Development of Continuity of Operations Plan (COOP) in conjunction with Area Records Management Officers.
- Development of Vital Records Plan in conjunction with Area Records Management Officers.
- Retooling of IHS Records Management training program
- Review of management internal control processes for records management program
- Establish and maintain in-house records destruction tracking procedures
- Facilitate communication of NARA policies, procedures, instructions, and information to senior management staff
- Craft and submit to NARA disposition schedules for three electronic information systems.
- Complete NARA records management certification program.

3.9   National Institutes of Health (NIH)

Records Officer: Kimberly Johnson

3.9.1   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.

National Institutes of Health Organization:

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/Center 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 on Minority Health and Health Disparities
National Institute of Neurological Disorders and Stroke
National Institute of Nursing Research
National Library of Medicine
National Center for Complementary and Alternative Medicine
National Center for Research Resources
Fogarty International Center
Clinical Center
Center for Information Technology
Center for Scientific Review

3.9.2   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.

Functions of the NIH Records Management Program include:
- Identify and establish standards and guidelines for documenting and maintaining records transactions with WNRC and other commercial storage facilities
- Maintain a reliable and usable NIH-wide recordkeeping system with a current listing of all records stored and records awaiting disposal at the Washington National Records Center (WRNC), records retired permanently to the National Archives and Records Administration (NARA) for historical archiving and records being stored at NARA-approved commercial storage facilities
- Evaluate and measure compliance with HHS and Federal Records guidelines and regulations

- Implement NARA Bulletins to ensure compliance
- 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 (CPIC), Solutions Development Lifecycle, Enterprise Architecture, Information Security, Risk Management Assessments, and 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.

3.9.3 NIH Records Management Accomplishments in 2010

- Successfully managed daily NIH Records Management Program operations and customer service requests
- Attended the HHS Records Officers' OPDIV and HHS Records Management Council meetings and participated in NARA BRIDG meetings
- Completed the online, "NARA Records Management: Mandatory Self-Assessment," prior to the deadline
- During 2010, worked with NARA on electronic systems submitted during 2009 by providing additional information on systems and retention schedules. Continued to gather information in 2010 on electronic systems and subsystems for review and scheduling. As of September 2010, no additional systems were identified.
- Managed and tracked expenditures for NIH in FY2010 at Washington National Records Center (WNRC) Storage and Service Fees
- Continued participation and oversight of the NIH Vital Records Program in compliance with all related Federal mandates and participated with the NIH Continuity of Operations (COOP) Working Group on: NIH-wide Vital Records Inventory and copying Vital Records on a secure information system
- Initiated a review of research records schedules to evaluate retention periods and language and identified unscheduled records
- Developed NIH file plan guidance
- Performed a 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 , including NIH Manual Chapter 1743 – NIH Records Schedule: Keeping and Destroying Records, Manual Chapter 1742 - Transfer, Withdrawal and Destruction of Records at the Washington National Records Center)
- Developed Records Management SharePoint site for the NIH Records Community. The site houses resources and guidance related information, policies, practices, tools, templates, meeting and event information, and announcements. Implemented SharePoint tool to assess the records climate through online surveys and other communication tools
- Implemented and led monthly OD and IC Record Liaison Meetings comprised of 66 records liaisons representing 27 ICs and multiple OD Offices
- To promote records awareness and education for NIH Records Liaisons, the NIH Records Officer invited specialists in records management areas to address current records issues.
- Transferred 2497 boxes of records to the WNRC
- Managed and tracked expenditures for NIH in FY2010 at Washington National Records Center (WNRC) Storage and Service Fees

- Worked with ICs and ODs to relocate records stored in non-compliant facilities to compliant facilities including the WNRC
- Received NARA approval for Records Control Schedule NI-443-10-001, Patents, Inventions and Licensing
- Participated in SPORT (Security and Privacy On-line Reporting Tool) and NEAR (NIH Enterprise Architecture Repository) training and received access to electronic systems to identify new systems requiring retention application
- Worked with NIH Staff and contacts to identify/develop retention schedule requirements for web records and social media
- Provided targeted training to Institutes and briefings to administrative and management working groups
- Reviewed internal control processes for records management program
- Developed guidance for processing departing employees and managing their records
- Performed a formal Risk Assessment on the NIH Records Program to identify potential risks, formulated approaches to mitigate all identified risks

3.9.4 NIH Future Records Management Initiatives

- Successfully administer the NIH Records Management Program, leading daily operations, satisfying customer service requests, addressing the agency requirements and NARA requirements
- Review and revise retention schedules in Manual Chapter 1743. Initial focus will be on the 3000 series, Research Records, and modification of language to media neutral language; and then on to another series.
- Continue to review and implement clear and comprehensive records management policies for the following NIH Manual Chapters: 1742: Transfer and Disposition of Records, and 1743: Keeping and Destroying Records, and 1744: NIH Vital Records Program
- Create guidance for Records Liaisons to ensure permanent records are retired to FRC in accordance with NARA requirements
- Register and implement the new NARA ARCIS Database for all NIH WRNC transactions
- Continue to work with HHS and IT to develop the HHS Enterprise Architecture Repository (HEAR) and NIH Enterprise Architecture Repository (NEAR) systems to collect information and schedule recently created electronic systems including web applications
- Conduct review of NIH Manual Chapter 1744-Vital Records to ensure it is compliant with the requirements of the NARA and related Federal mandates
  - Revise guidance for Vital Records Liaisons to establish bi-annual collection of IC/OD vital records and provide updates to the program
- Implementation and roll-out of Records Management for Everyone Training

3.10 HHS Offices of the Secretary

Records Officer: Elaine Pankey

3.10.1 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 18 support components, referred to as OS Staff Divisions or STAFFDIVS.

3.10.2 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). As of October 2010, records managers were established within each of the 18 staff divisions. These assignments are informal (e.g., not in position descriptions and/or performance elements).

HHS OS Organization:

Office of the Secretary – Immediate Office of the Secretary
Assistant Secretary for Administration (ASA)
Assistant Secretary for Financial Resources (ASFR)
Assistant Secretary for Legislation (ASL)
Assistant Secretary for Planning and Evaluation (ASPE)
Assistant Secretary for Preparedness and Response (ASPR)
Assistant Secretary for Public Affairs (ASPA)
Center for Faith-Based and Neighborhood Partnerships (CFBNP)
Departmental Appeals Board (DAB)
Office of Civil Rights (OCR)
Office of Consumer Information and Insurance Oversight (OCIIO)
Office of General Counsel (OGC)
Office of Global Health Affairs (OGHA)
Office of the Inspector General (OIG)
Office of Intergovernmental Affairs (IGA)
Office of Medicare Hearings and Appeals (OMHA)
Office of the National Coordinator (ONC)
Office of Public Health and Science (OPHS)
Office of Security and Strategic Information (OSSI)

3.10.3 OS Records Management Accomplishments in 2010

- Completed file plan training (workshops and ad hoc): approximately 267 ad hoc and 21 formal office-specific training sessions.
- Completed file plan validation project: 216 file plans for the records of 242 offices of OS, were completed by the August 1, 2010 deadline.
- Established in the OCIO Sharepoint portal a file plan validation status file.
- Established and implemented a file plan master template for use by all OS Staff Divisions to ensure consistency across OS.
- Established and implemented a "Certification of Review and Approval of File Plan" sign-off for all OS Staff Division Program Leads signature to ensure their review and approval of the content.
- Records Disposition
  - o assisted the Office of Consumer Information and Insurance Oversight with the establishment of draft file plan, prior to the organization's transfer to CMS

- o updated the inventory of approximately 500 boxes pending shipment to the Washington National Records Center (WNRC) for storage and assisted with preparation of the appropriate paperwork
  - o retrieved approximately 52 boxes back from storage at the WNRC for FOIA requests
  - o implemented NARA's Archives and Records Centers Information System (ARCIS) access for all OS Staff Divisions records managers
  - o provided constant interpretation of records schedule disposition instructions
  - o established a standard memo to document the proper transition of OS program records due to employee transfers or departures
- Achieved a 95% electronic systems scheduling completion rate:
  - o Identified 90 electronic systems and determined that the dispositions of the records contained in 80 of the systems were covered by previously approved records schedules.
  - o Six electronic systems schedules were submitted to NARA and are pending NARA approval.
  - o Four electronic systems will be scheduled by OS in FY2011.
- Completed and submitted the 2nd Annual NARA and GAO Mandatory Self-Assessment
- Held OS Records Management Council Meetings on 2/24/2010, 5/19/2010, 8/18/2010, and 11/17/2010
- HHS OS Records Officer and Deputy Records Officer completed the NARA records management certification program by completing all NARA training courses, taking the NARA on-line tests, and receiving their NARA certificates.

3.10.4 OS CY 2011 Records Management Initiatives

- Complete the four OS e-systems records schedules
- Begin scheduling unscheduled STAFFDIV records and updating STAFFDIV records schedules per the NARA media neutral methodology
- Support the HHS RO in teaching the Records Scheduling workshops

3.11 Substance Abuse and Mental Health Services Administration (SAMHSA)

Records Officer: Jeanellen Kallevang

3.11.1 SAMHSA Business Description

The mission of the Substance Abuse and Mental Health Services Administration is to reduce the impact of substance abuse and mental illness on America's communities.

3.11.2 SAMHSA Records Officer Position

The records management function is located in SAMHSA's Office of Management, Technology and Operations (OMTO), Division of Management Services (DMS). One FTE has been assigned the records officer duties as an additional duty. This employee has two FTEs (again as an additional duty) and a contractor to assist in the program.

SAMHSA Organization:

Office of the Administrator
Office of Communications

Office of Financial Resources
Office of Management, Technology and Operations
Office of Policy, Planning and Innovation
Center for Behavioral Health Statistics and Quality
Center for Mental Health Services
Center for Substance Abuse and Prevention
Center for Substance Abuse and Treatment

3.11.3 SAMHSA Records Management Accomplishments in 2010

- Submitted the SF-115 to HHS for a new electronic information system.
- Arranged for NARA records analysis (appraisal) visits and sent information to NARA regarding the electronic systems submitted to NARA last year for scheduling per NARA's instructions.
- Issued several directives regarding maintenance of certain record types [examples: oil spill; health care reform].
- Initiated mandatory web-based Records Management training for employees and provided hard copy to contractors.
- Completed and submitted June 2010 2nd Annual NARA Mandatory Self-Assessment.

3.11.4 SAMHSA Future Records Management Initiatives

- Initiate transfer of permanent records to NARA
- Initiate training for NARA Records Management Certification of two (2) DMS employees
- Update website
- Complete scheduling of electronic records

4   HHS Department Records Officer Initiatives in Calendar Year 2011

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

- Implement across the Department's RMC the use of the NARA Electronic Records Archives (ERA) for records scheduling and the transfer of permanent records to NARA. The records officer will serve as advisor on the NARA Federal Records Council (FRC) ERA subcommittee
- Continue to update and establish department-wide records management program policy and procedures
- Maintain an HHS records management program that includes such elements as
  - o Defined roles and responsibilities
  - o Articulated policies, procedures and guidelines
  - o Tracking of storage costs and use of storage facilities
  - o 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
  - o Consistency across records management operations
  - o Serving, in accordance with 36 C.F.R. Subchapter B, as the HHS liaison to the National Archives and Records Administration (NARA) and as the primary point of contact for Department-wide records issues
  - o Coordination of OPDIV comments on regulations and guidance pertaining to records management
  - o OPDIV records schedule (SF115) written in accordance with HHS and NARA standards and submitted to and coordinate with the HHS RO for NARA appraisal and approval

The goals, initiatives and measures for the 2011 Records Management Program as reported by the Chief Information Officer to the Assistant Secretary for Administration are:

Ensure that appropriate documentation of HHS decisions and business processes are retained for posterity in compliance with the Federal Records Act, and that records management practices satisfy retrieval, litigation, open government, and business continuity needs while preventing premature destruction.

- Percent of HHS Draft OS Records Schedule Items to be submitted to NARA: 25%
- Percent of HHS automated information systems with approved records retention schedules: 100%
- Percent of HHS Records Officers and OS Records Managers with certificates from the NARA/HHS FY2011 Records Scheduling Workshop: 100%

5   Summary

In 2010, 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 major records management initiatives:

- Achieved for the second year in a row a 97% compliance rate with E-Government Act of 2002 through the development and submission of HHS electronic systems inventory and electronic systems records schedules;
- Complied 100% with the second annual NARA Government-wide Records Management Assessment;
- Instituted Department-wide mandatory on-line records management training;
- Implemented draft litigation hold policy and procedures;
- Served a vital role in the implementation of legal holds as a result of Affordable Care Act and Deepwater Horizon litigation;
- Complied with 36 CFR 1234, NARA Facilities Reporting Requirements when using non-NARA records storage facilities, and negotiated with NARA on the certification and inspection of facilities;
- Incorporated records management language in multiple HHS OCIO policies and charters; and
- Conducted large-scale records management projects throughout the HHS RMP, including inventorying, scheduling, file plan validation, and records management training.

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

APPENDIX B RECORDS MANAGEMENT GAP PRIORITY TABLE

Rank	Gaps and Improvement Opportunities	Priority Score
1	**Unique Records Schedules and File Plans** *(Inventory of OPDIVs records schedules) (4.2.1)*	35
Document Repository, Web Content, and Correspondence Management Systems *(4.2.2)*		
2	Document Repository Systems *(e.g. Documentum, SharePoint, etc.)*	34
2	Web Content Management Systems	34
2	**Scheduling of IT Systems** *(4.2.3)*	34
3	**RM Process Consistency** *(4.2.4)*	33
E-mail Systems *(4.2.5)*		
3	Process of creating and maintaining emails	33
3	Current Technical Solution	33
3	**Continuity of Operations (COOP)** *(4.2.6)*	33
3	**Litigation and Records Holds** *(4.2.7)*	33
4	**Freedom of Information (FOIA)** *(4.2.6)*	32
5	**All Other IT Systems** *(Not already listed above) (4.2.3)*	30
Training *(4.2.8)*		
6	SES Records Management Training Material	30
6	HHS Records Management Training	30
RM Integration with other Enterprise Processes *(4.2.6)*		
7	Human Resources (HR) - *(i.e. New hires and employee exit)*	28
8	Capital Planning *(IT System/EPLC)*	27
8	Information Security *(IT System/EPLC)*	27
9	**Records Management Governance Structure**	22
10	**Resources**	21
11	**Paper Records**	20
12	**Records Management Application** *(4.2.2)*	19
Document Repository, Web Content, and Correspondence Management Systems *(4.2.2)*		
13	Correspondence Management Systems	18
14	**Federal Record Centers Audits**	12
RM Integration with other Enterprise Processes *(4.2.6)*		
15	Enterprise Architecture *(Business Process modeling checklist)*	11

APPENDIX C NARA 2009 GOVERNMENT-WIDE RECORDS MANAGEMENT SELF-ASSESSMENT SURVEY RESULTS FOR HHS

HHS Scores by section of the NARA Report:

Agency	Size	Section 1: Program Management (Max pts 26)	Section 2: Records Disposition (Max pts 18)	Section 3: Vital Records (Max pts 8)	Section 4: Electronic Records (Max pts 18)	Section 5: E-mail (Max pts 30)	Total For Component (Max pts 100)
SAMHSA	S	15	14	6	14	18	67
AOA	S	26	18	0	14	16	74
AHRQ	S	14	18	8	18	18	76
HHS OS	S	26	18	0	10	26	80
ACF	L	10	14	8	12	30	74
IHS	L	26	14	8	6	22	76
FDA	L	26	14	8	18	30	96
CMS	L	22	18	8	4	30	82
CDC	L	26	18	8	18	30	100
HRSA	L	8	10	0	0	0	18
NIH	L	26	18	8	14	30	96
HHS OS OCIO (HHS DRO responses)	HQ	26	18	8	8	26	86
				Overall Average Score			**77**

HHS Risk Levels:

High Risk (score of 59 points or less):	**Moderate Risk (score of 60 to 89 points):**	**Low Risk (score of 90 to 100 points):**
HRSA – 18 points	AOA – 74 points	CDC – 100 points
	CMS – 82 points	HHS OS OCIO – 86 points (results from responses to the survey provided by the HHS DRO)
	AHRQ – 76 points	NIH – 96 points
	SAMHSA – 67 points	FDA – 96 points
	HHS OS – 80 points	
	ACF – 74 points	
	IHS – 76 points	

APPENDIX D HHS CY2010 E-SYSTEMS SCHEDULING RESULTS

Department of Health and Human Services (HHS) Operating Division	Total Number of E-Systems or Series	Total Number of Approved E-Systems or Series (S)	Total Number of E-Systems or Series Submitted to NARA and Pending Approval (P)	Total Number of Unscheduled E-Systems or Series (U)	Percentage of All E-Systems and Series Scheduled or Pending with NARA
ACF	17	6	6	5	70%
AoA	8	7	1	0	100%
AHRQ	15	3	9	3	80%
CDC	709	425	284	0	100%
CMS	248	136	110	2	99%
FDA	133	120	12	1	99%
HHS OS	90	80	6	4	95%
HRSA	30	4	5	21	30%
IHS	12	0	0	12	0%
NIH	336	121	215	0	100%
SAMHSA	8	2	5	1	88%
TOTAL	1605	904	652	49	97%

Green = Schedule approved by NARA
Yellow = Schedule pending with NARA
Red = Unscheduled

APPENDIX E OS RECORDS INVENTORY AND FILE PLAN VALIDATION PROJECT

OS Records Disposition Authority Project Phase I -- Status of OS Records Inventory Project Completed as of 09/30/10					
#	OS StaffDivs	StaffDiv Offices	StaffDiv Units/ Divisions within	# of File Plans Validated	Percent completed
1	ASA	Immediate Office	1	1	100%
		OBMT	6	6	
		OCIO	5	5	
		OFMP	5	5	
		ODME	5	5	
		OHR	12	12	
		PSC	23	10	
			57	44	
2	IOS	Secretary's Office	1	1	100%
		Deputy Secretary Office	1	1	
		Chief of the Staff Office	1	1	
		Office of the Counselors	1	1	
		Executive Secretariat Office	1	1	
		Scheduling Office	1	1	
		White House Liaison	1	1	
		Intergovernmental Affairs Office	4	4	
		Office on Disability	1	1	
			12	12	
3	OSSI	Immediate Office	1	1	100%
		Strategic Information & Physical Security	2	2	
		Personnel Security & Classified Information	1	1	
			4	4	
4	ASL	Immediate Office	1	1	100%
		Budget & Discretionary Health	1	1	
		Mandatory Health & Human Serv.	1	1	
		Congressional Liaision Office	1	1	
		Oversight & Investigations	2	2	
			6	6	
5	ASFR	Immediate Office	1	1	100%
		Office of Budget	3	3	
		Office of Finance	3	3	
		Office of Recovery Act Coordination	4	4	
		OGAPA	3	1	
			14	12	
6	ASPA	Immediate Office	1	1	100%
		Media, Press Office, FOIA	4	4	
		Policy & Strategy	4	4	
			9	9	

#		Office			
7	**ASPE**	Immediate Office	1	**1**	100%
		Disability, Aging, & Long Term Care	1	**1**	
		Health, Human Services and Science & Data Policy	3	**3**	
			5	5	
8	**ASPR**	Immediate Office	1	**1**	100%
		BARDA	7	**4**	
		Ofc. Of Preparedness & Emergency Operations	7	**1**	
		Office of Acquisition Mgmt, Contracts & Grants	6	**4**	
		Office of Policy & Planning	5	**1**	
		Office of Financial Planning & Analysis	5	**1**	
			31	12	
9	**CFBNP**	Center for Faith Based Communities Program	1	**1**	100%
			1	1	
10	**DAB**	Immediate Office	1	**1**	100%
		Civil Remedies	1	**1**	
		Appellate	1	**1**	
		Medicare Operations	2	**2**	
		Alternative Dispute Resolution	1	**1**	
			6	6	
11	**OCR**	Headquarters	1	**1**	100%
		Regions	10	**10**	
			11	11	
12	**OGC**	Immediate Office	1	**1**	100%
		Headquarters	7	**8**	
		Regions	10	**10**	
			18	19	
13	**OGHA**	Immediate Office	1	**1**	100%
		Executive Office	2	**4**	
		Regions	5	**1**	
		PEPFAR	1	**1**	
		Influenza Unit	1	**1**	
			10	8	
14	**OIG**	Immediate Office	1	**1**	100%
		Audit Services	1	**1**	
		Counsel to Inspectors General	1	**1**	
		Evaluation & Inspections	1	**1**	
		Investigations, Management & Policy	2	**2**	
		Regional Inspectors General	10	**10**	
			16	16	
15	**OMHA**	Headquarters	3	**3**	100%
		Field Offices	4	**4**	
			7	7	
16	**ONC**	National Coordinator / Immediate Office	1	**1**	100%
		Deputy National Coordinator for Operation	1	**1**	
		Deputy National Coordinator for Program & Policy	4	**4**	
			6	6	
17	**OPHS**	Immediate Office	1	**18**	100%
		National Vaccine Program Office	1	**1**	
		Office of Commissioned Corps Force Management	1	**1**	
		Office of HIV/AIDS Policy	1	**1**	

		Office of Human Research Protections	1	**1**	
		Office of Minority Health	1	**1**	
		Office of Population Affairs	1	**1**	
		Office of Research Integrity	1	**1**	
		Office of the Surgeon General	3	**4**	
		Office on Women's Health	1	**1**	
		Office of Adolescent Health	1	**1**	
		President's Council on Physical Fitness & Sports	1	**1**	
		Regions	10	**1**	
			24	33	
18	**OCIIO**** (**function transferred to CMS in January 2011)	Director's Office	1	**1**	100%
		Office of Oversight	1	**1**	
		Office of Insurance Programs	1	**1**	
		Office of Health Insurance Exchanges	1	**1**	
		Office of Consumer Support	1	**1**	
			5	5	
	Total		242*	216	
	*Subject to change due to STAFFDIV realignment				
			File Plans Submitted and Validation Completed = 100 %		

APPENDIX F HHS RECORDS STORAGE AND SERVICE COSTS

OPDIV	Number of cubic feet stored in NARA Federal Records Centers	What are the estimated NARA storage and service costs for FY2010?	How many commercial storage vendors does the OPDIV use?	How many cubic feet are stored in commercial storage?	What are the estimated commercial vendor storage and service costs for FY2010?
Administration for Children and Families (ACF)	9,225	$27,203	N/A	N/A	N/A
Administration on Aging (AoA)	None	N/A	N/A	N/A	N/A
Agency for Healthcare Research and Quality (AHRQ)	None	N/A	N/A	N/A	N/A
Centers for Disease Control (CDC)	48,771	$163,027	N/A	N/A	N/A
Centers for Medicare and Medicaid Services (CMS)	487,871	$1.5 million (includes service contract with NARA for imaging of paper to electronic so as to be more responsive to FOIA)	approximately 127	3,222,048	$2.7 million
Food and Drug Administration (FDA)	119,160	$360,000	N/A	N/A	N/A
Health Resources and Service Administration (HRSA)	38,055	$100,675	N/A	N/A	N/A
Indian Health Service (IHS)	104,573	$386,083	1	403	$2,100
National Institutes of Health (NIH)	44,641	$158,227	25	20,996	$186,895
Office of the Secretary (OS)	67,834	$213,515	N/A	N/A	N/A
Substance Abuse and Mental Health Services Administration (SAMHSA)	1,212	$5,044	N/A	N/A	N/A
TOTAL:	**923,398 cubic feet**	**$2,873,725.00**	**153 commercial vendors**	**3,243,442 cubic feet**	**$2,888,815.00**