



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

Annual Evaluation
January – December 2011

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:

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

Federal agencies are required to periodically evaluate their records management programs. This is the fifth 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 was located in the HHS Office of the Chief Information Officer (HHS CIO), Office of Resources Management (ORM). In 2011, the RMP functions formerly in ORM were realigned into OCIO Office of Enterprise Architecture (OEA), with the intent to centralize records management, information technology (IT) policy and operations functions.

1.1 HHS RMP high-level initiatives and accomplishments in 2011:

- In accordance to National Archives and Records Administration (NARA) and Office of Management and Budget (OMB) requirements established under the E-Government Act of 2002, HHS submitted the Semi-Annual Report on Scheduling Electronic Records concerning our agency's responsibility to report on the status of electronic records scheduling activities. As of March, 2011, HHS had scheduled 84% and as of September 2011 HHS had scheduled 83% of its electronic systems. The percentage of electronic systems differs due to 22 additional electronic systems being identified between March and September of 2011. (See Appendix D).
- Completed 100% of the third annual Records Management Self-Assessment of Federal records management programs, where the focus was on ensuring the reliability, authenticity, integrity, and usability of agency electronic records maintained in electronic information systems.
- HHS Policy for Litigation Holds was published on January 20, 2011 in order to support HHS Office of General Counsel (OGC) in the implementation of ongoing litigation holds.
- Provided comments to OMB in response to a Data Call for Agency costs for e-mail records management.
- HHS and NARA signed an \$11,500 interagency agreement for two 2-day mandatory records scheduling workshops. As a result, in March and July the workshops were presented to the HHS OPDIV Records Officers (ROs) and the OS STAFFDIV Records Managers (RMs). The intent of the workshops was to support update of the HHS OS Records Management Handbook, and to encourage the continuance of the process of preparing and submitting records schedules as part of our legal obligation to properly manage the records of the Department.
- Successfully participated in the first phase of the roll-out of NARA Electronic Records Archives (ERA) system pilot. HHS was selected by NARA to participate as a pilot agency. As a result, beginning in March 2011, HHS OS transitioned to the ERA system as a mandatory process for scheduling records. The following HHS OPDIVS have also transitioned during this calendar year: CDC, CMS, and IHS



1.2 Stovepipes or gaps identified in the 2010 HHS RMP annual evaluation that were resolved in 2011:

- 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 conducted periodic reviews to ensure that the information was accurate and up-to-date (<http://www.hhs.gov/open/records/index.html>);
- Incorporated records management in the Enterprise Architecture (EA) process – incorporated data disposition instructions within the EA framework;
- Established an OS-wide framework of records management staff: In 2010 the Department's RMP was located in the HHS Office of the Chief Information Officer (HHS CIO), Office of Resources Management (ORM). In February 2011, the RMP functions formerly in ORM were realigned into OCIO Office of Enterprise Architecture (OEA).
- Filled vacant OPDIV records officer position in the Administration for Children and Families (ACF).
- Received Archivist of the United States approval for HHS records: Because of the importance and sensitive nature of the Secretary of the Department of Health and Human Services and the high-level officials in the Immediate Office of the Secretary a request for records disposition authority (SF-115) for the official briefing books was submitted and approved by NARA. Also, the following two Department-wide records disposition authorities have been approved by the Archivist of the United States: Travel and Miscellaneous Expenses Files and Non-Selected Applicants Records.
- Improved internal communication:
 - Improved legal hold communications – collaboration between HHS RO, HHS Chief Information Officer (CIO), and HHS OGC communities; HHS Policy for Records Holds was published January 20, 2011.
 - Continued development and distribution of records management guidance documents and briefings for 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;
 - 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; and
 - 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 held successful on-site meeting with NARA Appraisal Archivist to conduct a physical evaluation and negotiate appropriate language for the Briefing Books of the Secretary to facilitate the legal approval by the Archivist of the United States.



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

- Proceed with negotiations via NARA and HHS Learning Management System to reactivate the mandatory records management training for all HHS employees including contractor staff and senior officials. Remediation includes required 508 compliance and further modification to satisfy criteria for a quality course, and content suitable for adult learners.
- Establish a standard procedure for providing training on the importance of appropriately managing records under the immediate control of all senior officials and appointed officials, including those incoming and newly promoted.
- Obtain management buy-in to strengthen the HHS Vital Records Program in order to continue the identification of vital records of all HHS program and administrative areas.
- Transfer eligible permanent non-electronic records to the National Archives as required by NARA.
- Establish a standard procedure to conduct exit briefings for senior officials on the appropriate disposition of records, including e-mail, under their immediate control.
- Proceed with updating the current records management and e-mail preservation policies to be in compliance with NARA guidelines.
- Update established and revised information management policies and processes posted at HHS OpenGov and HHS CIO websites (<http://www.hhs.gov/open/records/index.html> and <http://www.hhs.gov/ocio/policy/recordsmanagement/index.html>);
- Enhance 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;
- Define records management procedures for the creation and maintenance of HHS information for the web (including social media/third-party provider tools such as Facebook, wikis, and blogs) with coordination between HHS content owners, website managers, and records managers;
- Coordinate 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;
- Coordinate with HHS Freedom of Information Act (FOIA) officials in the implementation of processes and procedures for record litigation holds (see HHS Policy for Litigation Holds HHS-OCIO-2010-0008 published on January 20, 2011); and
- Coordinate with appropriate subject matter experts on the implementation of OGC procedural steps for legal holds and the HHS Policy for Litigation Holds.

The HHS RMP continues to establish standard operating procedures for 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 2011 to December 2011 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 2011, 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 Enterprise Architecture (OEA) within the Office of the Assistant Secretary for Administration (ASA) due to realignment effective March, 2011.

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 Enterprise Architect, the Chief Information Officer, and the Office of the Assistant Secretary for Administration (ASA).

The Department RO position was vacant effective July 2011 through January 2012 and as a result the Office of the Secretary RO served in its capacity.

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 practices
- develop target records management business processes, and
- identify and plan the sequence of actions for improving the HHS RMP.

These objectives were accomplished in late 2009 and early 2010.

The final work product of the IPT was a Records Management Transition Plan, defining the recommended actions to fill the gaps identified in the RMP in the order in which those actions should be performed. The timeline from the Records Management Transition Plan is contained in Appendix B.

Notably, the loss of the Department Records Officer in 2011 stalled progress on performance of the Records Management Transition Plan. The timeline will be revised and work on the recommended actions will continue now that a new permanent Department Records Officer has been hired.



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

<i>Records Officer Name</i>	<i>Operating Division</i>	<i>RG</i>	<i>Work Centers</i>
Vacant or Elaine Pankey (Acting)	Department of Health and Human Services		
Gloria Decker	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 2011 Accomplishments:

i. Government-wide Mandates

- a. 100% HHS response rate to the third Annual NARA Records Management Self-Assessment – based on a NARA-developed risk-identification methodology, HHS scored 77 out of 100 points. See Appendix C for the HHS risk scores.
- b. Submitted to OMB and NARA E-Government Act of 2002 reports of scheduled and unscheduled records in electronic systems, with the following information:
 - Inventoried 1725 HHS systems in 2011 (see Appendix D)
 - Continued identification of HHS unscheduled electronic systems to improve the scheduling rate
 - Submitted project plans to NARA for the remaining 17% of HHS unscheduled systems
- c. Responded to OMB leadership in response to a possible reintroduction of H.R. 1387 (Electronic Records Preservation Act) with questions regarding how HHS is managing e-mail records and the associated costs.
- d. The HHS RMP supported the HHS Office of General Counsel and the Department of Justice by distributing legal hold notices to HHS OPDIV Records Officers, OS STAFFDIVs Records Managers, the HHS Chief Information Officer Council, and program officials.
- e. Transitioned to 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 continued working 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. 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.
- c. The HHS Policy for Records Holds (HHS-OCIO-2010-0008) incorporating clarifications received from the Department of Justice, HHS Office of Inspector General, and HHS Acting General Counsel was finalized effective January 20, 2011.



- d. The HHS OS RO provided support in the establishment of records management programs in the Office of Health Reform and Office of Environmental Justice within the Office of the Surgeon General.

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. Launched Phase II of a multi-year project that will consist of the scheduling of OS unscheduled records and rescheduling out-of-date scheduled records identified during Phase I File Plans Validation project that ended in August 2010.
- 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. Records were approved for shipping in 2011.

iv. Training

- a. Conducted RM training in bi-weekly HHS New Employee Orientation sessions: records management presentations to approximately 800 new employees.
- b. Records Scheduling Workshop: HHS and NARA signed an \$11,500 interagency agreement for two 2-day records scheduling workshops. Workshops were 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.
- c. Provided additional records scheduling workshops as requested for developing OS records disposition schedules: approximately 55 one-on-one sessions provided to records managers and program leads which involved business analysis and records analysis to determine the appropriate length of retention.



3 HHS Records Officer Self-Assessments

3.1 Administration for Children and Families (ACF)

Records Officer: Gloria Decker

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

- Office of Deputy Assistant Secretary for Administration
- Office of Deputy Assistant Secretary for Policy
- Office of Deputy Assistant Secretary for Early Childhood Development
- 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 2011

Pre-Scheduling:

- Continued review of ACF records schedules
- Requested program offices take an inventory of their records and complete file plan for compilation of updated ACF records schedules – ACYF, OCC and OFA began inventory process.

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 149 boxes

Records Schedules:

- Added link to ACF Records Schedules on the ACF Intranet
- 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:
 - Federal Case Registry (FCR)
 - Trafficking Victims Tracking System (TVTS)
- The following electronic systems are pending NARA approval:
 - National Directory of New Hires (NDNH)
- The following records schedules have been submitted to HHS and are pending approval:
 - ACYF Comprehensive

Training

- Office of Administration collaboration to convert “Records Management for Everyone” to an online training module.
- Offered training to contractors – 83% completion rate

Assessments:

- Completed and submitted to the Department RO the 2011 E-Records Scheduling Status Report
- Completed and submitted the 3rd 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 records schedules
- Offer “Records Management for Everyone” online training to Federal and Contractor staff for annual compliance
- Encourage formal training for all records liaisons
- Continue training, adoption and usage of Archives Records Centers Information System (ARCIS) and Electronic Records Archives (ERA)
- Work with upper-level management, HHS and IT to improve records management program
- Update ACF Records Manual



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 23 offices in the Agency headquarters and nine regional offices generating records.

AoA Organization

- 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 Program Operations
 - Office of Home and Community-Based Service
 - Office of Elder Rights

 - Office of American Indian, Alaskan Native and Native Hawaiian Programs
 - Office of Outreach and Consumer Information
- Center for Policy, Planning and Evaluation
 - Office of Program Innovation and Demonstration
 - Office of Policy Analysis and Development
 - Office of Performance and Evaluation
- 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 2011

- Received Archivist sign-off on the last of seven disposition schedules submitted previously for approval – the schedule of the internet and the intranet.
- Transmitted to NARA a draft schedule for CLASS, a new component of AoA, followed with discussion with NARA staff.
- 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 reorganization; as well as compliance with disposition schedules, and continuing identification of new electronic systems.
- 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.
- Implemented discussion and signoff for each individual leaving AoA.
- Conveyed records management responsibilities of contractors to AOA procurement staff.

3.2.4 AoA Future Records Management Initiatives

- Minor pen and ink changes to recently approved schedules to align with 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. An individual within each office/center is assigned records management responsibility as an additional function.



AHRQ Organization

- 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 2011

- Completed and submitted the Annual NARA and GAO Mandatory Self-Assessment
- Working with a contractor to inventory AHRQ records and to draft records disposition schedules with the goal of updating the AHRQ records handbook and file plan
- Continue to keep upper management involved in the AHRQ records management program to enhance its level of importance

3.3.4 AHRQ Continuing 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: Mary Wilson

3.4.1 CDC Business Description

CDC Mission 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

These functions are the backbone of CDC's mission. 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.

<http://www.cdc.gov/about/organization/mission.htm>

CDC Organization

- 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 Minority Health and Health Equity
 - 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 Non-communicable 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

3.4.2 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 forty-nine senior records liaisons and twenty-two records liaisons assigned either FTE or PTE throughout CDC. The Records



Management team also supports the Agency for Toxic Substances and Disease Registry (ATSDR).

3.4.3 CDC Records Management Accomplishments in 2011

- Inventoried and scheduled 189 new electronic systems
- Developed and implemented an electronic records inventory system
- Launched a comprehensive records inventory project throughout CDC
- Continuing the ongoing development of file plans throughout CDC/ATSDR
- Drafted a new Records Management Policy for senior management review
- Provided 40 training sessions to offices relocating
- Offered 4 training sessions to senior records liaisons on their responsibilities
- Presented at 3 brown bag sessions
- Collaborated with Operational Policies Management in reviewing 4 CDC wide policies
- Established a CDC Enterprise-Wide Records Management Project team to examine, evaluate, and develop a strategic plan for managing electronic records

3.4.4 CDC Future Records Management Initiatives

- Continue the work of the CDC Enterprise-Wide Records Management Project team
- Carry on with the enhance records management database
- 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 comprised of 38 Centers, Offices, and Consortia (20 Headquarters, 4 Consortia, 10 Regional Offices). Below is an organizational list of the CMS entities:

CMS Organization

- Office of the Administrator & Principal Deputy Administrator
 - Planning & Performance Management & Analysis Staff
- Operations
 - 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
 - Consortium for Financial Management and Fee-For-Service Operations
 - Consortium for Medicaid & Children's Health Operations
 - Consortium for Medicare Health Plans Operations



- Consortium for Quality Improvement and Survey and Certification Operations
- Center for Medicare
 - Center for Medicare Management
 - Center for Drug and Health Plan Choice
- Center for Consumer Information and Insurance Oversight
- Center for Medicaid, Children’s Health Insurance Plan and Survey and Certification
- Center for Medicare and Medicaid Innovation
- Center for Program Integrity
- Center for Strategic Planning
- Federal Coordinated Health Care Office
- Office of Clinical Standards & Quality
- Office of Communications
- Office of Equal Opportunity and Civil Rights
- Office of Legislation
- Office of Public Engagement
- Office of Minority Health
- Office of Strategic Operations and Regulatory Affairs
- Office of the Actuary
- 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, Records Management Staff. There are three FTEs assigned to the Records Management Staff (Records Officer, Vital Records Coordinator, and a Records Management Specialist).

3.5.3 CMS Records Management Accomplishments in 2011

- Worked in partnership with the Enterprise Architecture Staff to have Records Management included in their systems development life cycle framework. This is a huge step in ensuring records management is addressed when new systems are developed.
- Continuing compliance with the E-Government Act of 2002 and related OMB mandate and to schedule all agency electronic information systems.
- Developed five e-Record schedules to establish dispositions to cover the Agency’s electronic information systems.
- Developed and received NARA’s approval on two new record schedules and a one-time disposal.
- Developed several records management & information pamphlets/brochures for distribution to Senior Executive Staff and CMS employees.
- Certified five commercial storage facilities for compliance with NARA facility standards to house Medicare contractor records. Received NARA’s approval on three of the five facilities.



- In conjunction with the Open.gov initiative, updated the agency's records schedule posted on CMS' external website.
- Trained and briefed newly appointed RLOs and VRLs on their records management responsibilities.
- Conduct 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.

Records Management Training:

- Updated the online records management education campaign which outlines employee's records management responsibilities and the importance to maintain awareness of what is considered a Federal record. This annual training is **mandatory** for all CMS employees.
- Provide a records management introduction to all new employees when entering on duty.
- Briefed outgoing employees on the requirements and approval process to remove records when an individual departs the agency.
- 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 imaging project with the Federal Record Center (FRC) in Fort Worth, TX to convert FOIA case files from paper to an electronic medium.
- Provided records management briefings to senior leaders at various leadership meetings.
- Working towards 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 identify, protect and make readily available the vital records, databases, and hardcopy documents needed to support Primary Mission Essential Functions and Mission Essential Functions under the full spectrum of all-hazards emergencies. 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.
- Developing a Records Emergency Action Plan which will address CMS' response should a records emergency occur.
- Transitioned vital records to the new COOP site and began planning to integrate vital records into an all-electronic COOP website.
- Completed the vital records data replication from the main server to two remote server locations. This will enable CMS to have real-time vital records in 3 locations.
- Conducted on-site NARA training for Emergency Planning and Response for Vital and Essential Information.



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 which includes all records and information management resources.
- Work with CMS contract staff to include records management regulations in all agency contracts, statement of works, etc.
- Refining a web-based records management manual that addresses all of records management policy and procedures that are unique to the Department and CMS.
- Continuing to establish a records recovery team and conduct training 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
- Planning and developing the requirements to implement the CUI program at CMS.
- Working towards securing an ECM for agency electronic records.

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 9 separate Centers and Offices maintaining records.

FDA Organization

- Center for Biologics Evaluation and Research (CBER), 9 Offices and 22 Divisions
- Center for Drug Evaluation and Research (CDER), 29 Offices and 65 Divisions
- Center for Devices and Radiological Health (CDRH), 8 Offices and 30 Divisions
- Center for Food Safety and Applied Nutrition (CFSAN), 12 Offices and 22 Divisions
- Center for Veterinary Medicine (CVM), 5 Offices and 12 Divisions
- Center for Tobacco Products (CTP), 7 Offices
- National Center for Toxicological Research (NCTR), 4 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 Records Management Accomplishments in 2011

Program Management and Coordination

- Records Schedules Approved by NARA:
 - ORA's Letters of Non-Repudiation Agreement for Digital Signatures
 - NARA Job Number N1-088-09-4 was approved in April for CVM.
- 2011 NARA Records Management Assessment:
In coordination with HHS, FDA ARLOs and the CIO's office, completed and submitted the 2011 NARA records management assessment with 12 validation attachments.
- 2011 Status Report: Electronic Information Systems:
Submitted two scheduling status reports of electronic information systems in March and September, 2011 to HHS.
- NARA's Electronic Records Archive (ERA):
FDA received training on the use of NARA's ERA on 11/16.
- Partial Freeze Lift:
Submitted a list of records series not relating to TIL to OCC on 11/10.
- Litigation Holds:
Submitted Draft records management SOPs for legal holds. Coordinated 13 litigation hold notices with ARLOs.
- Records Storage Assessment Study:
Attended bi-weekly meetings starting with a kick-off meeting on June 22 to develop centralized scanning work processes.
- Occupational Series PIM (Public Information Management):
As requested by HHS through OMP, submitted FDA responses with comments on the draft position classification for Public Information Management series, 0306.
- Participated in the following studies:
 - NARA Mixed Media Files Bulletin
 - OMB Controlled Unclassified Information Initial Guidance.
 - H.R. 1144 Transparency and Openness in Government Act –Electronic Records Section
- Records Management Meetings:
 - Attended meetings with HHS RM Council and discussed upcoming issues.
 - Attended Disaster Recovery meetings relating to vital records.
 - Led ARLO meetings, shared records related topics and provided informal training when needed.

Vital Records Management:

- Hired a Vital Records Manager.
- Identified Vital Records Coordinators in each Center/Office.
- Drafted a Vital Records Management Plan and submitted to management it for final approval.

Records Management Training:

- Provided RM training to newly hired ORA's Assistant Records Liaison Officer (ARLO); the ORA ARLO completed 98 hours of RM training.
- Trained employees in various Centers/Offices and in FDA field offices.
- Conducted RM presentations and provided office specific retention guidance documents for various program offices by CDER and other Center/Office ARLOs.



- Developed and provided content for Centers' RM intranet web pages.
- CVM, ORA, and NCTR have incorporated RM training classes as part of the Center's formal education program; and CDRH distributed RM newsletters on a regular basis.
- Provided comments on ORA's Quality Management System's RM Manual.
- RM training has been included on the new employee orientation program.

Special Projects:

- Critical Partner for Records Management as part of the IT EPLC Process:
 - Finalized specific RM roles at various EPLC stages and distributed to ARLOs. Out of 42 document types, 10 documents have been identified for review in the following stages: Initiation, Concept, Planning, Requirements, Design, Testing, Implementation, and Disposition; updated guidance document.
 - Completed a draft guidance document for imaging/scanning documents.
 - Reviewed the EPLC documents at various stages for several systems:
- Centers' Electronic Records Management Projects:
 - **CFSAN:** Successfully led data migration
 - **CBER:** published its comprehensive file plan through the FDA-approved social media known as Traction.
 - **CVM:** instituted e-Submitter and Appian Workflow software to capture and manage electronic records throughout the creation and use part of their lifecycle; receive approval of scanning SOPs and standards by OCC.
 - **NCTR:** implementing a plan for electronic records management
- Recommendations for Archiving Digital Audio and Video Records:
Researched archiving technology on digital audios and videos and provided recommendations for archiving digital audio and video records.

Records Disposition Activities:

- Interagency Agreement (IAG) with the National Archives (NARA):
Reviewed NARA invoices for records storage and services for correct billing; facilitated reimbursement of NARA fees from FDA Centers/Offices to the Central Fund.
- Transfer of Permanent Records to NARA - SF 258:
 - Transfer 101 cu. ft. of records for permanent transfer to NARA.
 - Transferred snapshots of Priority-Based Assessment of Food Additive PAFA files (CFSAN) to NARA.
- Transfer of Temporary Records to the FRCs - SF 135s:
 - Processed 65 SF-135 and transferred 2,982 cu. ft. of inactive records to FRCs.

Document Control Center (DCC)

Assisted with the plans, construction and on-site location of DCC.

3.6.4 FDA Future Records Management Initiatives

- Establish the Records Management Program within the newly created Center for Tobacco Products; develop and obtain approval of New Records Control Schedules for the Center for Tobacco Products (CTP) as new records are identified.
- Implement electronic records management projects that are approved by the CIO.
- Fully implement the Vital Records Management Program.



- Increase systematic records management training sessions and improve training materials. Examples include: complete an online course on records management to be used in the CVM Learning Management Institute; roll out new online records management course for use by flexiplace employees.
- Reduce records storage costs: Obtain DOJ's approval to partially lift TIL and transfer permanent records to NARA and dispose of temporary records.
- Participate in the NARA'S Email Management 2.0 Pilot.
- Respond to the Congressional inquiry on email management. Provide training to improve email management.

3.7 Health Resources & Services Administration (HRSA)

Records Officers: Angela Tuscani and Brandy Freeman

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 10 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 Management Officer Position

The Records Management Program is located in the Office of Operations/Office of Management/Division of Policy and Information Coordination. The HRSA Records Management Officer (RMO) provide management support and oversight of records policy and procedures, ensure compliance, and provide 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

- Office of the Administrator
- Bureau of Primary Health care
- Maternal and Child Health Bureau
- Bureau of Health Professions
- 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 Special Health Affairs
- Office of Regional Operations
- Office of Equal Opportunity, Civil Rights and Diversity Management
- Office of Planning Analysis and Evaluation
- Office of Women's Health

3.7.3 HRSA Records Management Accomplishments in 2011

- Managed the transfer of 142 boxes of records to the Washington National Records Center (WNRC) for storage. In addition, 65 boxes were disposed of by the WNRC;
- Coordinated the transfer of HRSA's permanent electronic records pertaining to the Area Resource Files 1940 to the National Archives, as requested by NARA;
- 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;
- Implemented a policy/procedures document for the Transfer, Withdrawal and Destruction of Records at the Washington National Records Center; and
- Prepared a policy/procedures documents for Office Closure/Transfer and Employee Departure and Vital Records Program
- Completed the annual NARA Electronic Records Scheduling Report and Records Management Self Assessment.
- Collaborated with HRSA's Office of Emergency Preparedness and Continuity of Operations to review HRSA's vital records program.
- Prepared training presentation for the Vital Records Program.
- Presented records management training at HRSA's Committee Management Federal Advisory Committee Act training.
- Prepared Records Management Overview training presentation and implemented Annual Records Management training.

3.7.4 HRSA Future Records Management Initiatives

- Continue to schedule and update HRSA's Electronic Records Information Systems;
- Continue with the transfer of permanent (historical) records to the National Archives;
- Continue building HRSA's Vital Records Program
- Provide updates, bulletins and notices regarding records management to the appropriate staff within HRSA;
- Draft Record Management procedures for new employees;
- Update and finalize Record File Plans;
- Combine and update HRSA's Record Schedule

3.8 Indian Health Service (IHS)

Records Management Officer: Christopher Forney



3.8.1 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 564 federally recognized tribes in 35 states.

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

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 23 offices generating records is below:

IHS Organization

- Office of the Director
- 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
- 12 Regional Offices

3.8.3 IHS Records Management Accomplishments in 2011

Assessments

- Successfully responded to NARA FY 2011 Records Management Self-Assessment.
- Successfully responded to NARA's Semi-Annual Report on Scheduling Electronic Records.
- Successfully responded to OMB survey in response to H.R. 1387 (Electronic Records Preservation Act).



Controlled Unclassified Information (CUI)

- RMO designated as agency CUI representative.
- Developed matrix for proposed CUI categories.
- Served on CUI working groups for business, critical infrastructure, and privacy.

Record Disposition Schedules

- Record schedules submitted to NARA for review.
- NARA Approved Records Schedule: Loan Repayment Recipient Files

Records Management Training

- Approximately 9,000 IHS employees completed the HHS online records management course titled HHS Records Management for All Employees.

3.8.4 IHS Records Management Initiatives

- The IHS intends to reorganize the records management function to a division that also has responsibility for FOIA, Privacy and forms.

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
- Evaluate, identify, and develop retention schedules to meet the needs of NIH records community
- Maintain a reliable and usable NIH-wide recordkeeping system with a current listing of all records stored and records awaiting disposal at the Federal Records Centers, 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 and Memorandum 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)
- Provide liaison services to NIH stakeholders working with DHHS and higher authorities regarding all aspects of recordkeeping and disposal.
- Initiate corrective actions for inadequate records management procedures within NIH.

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

3.9.3 NIH Records Management Accomplishments in 2011

- Developed a phased plan to update, redesign, and reengineer the agency's current records schedules. Undertook a comprehensive effort to inventory and update intramural research records, adopting NARA recommended approaches using media neutral, big bucket and flexible scheduling methods.
- Successfully completed the mandated Records Awareness Training with a completion rate of 95%.
- Based on NIH responses to NARA's annual records management Self-Assessment, NIH scored a total of 90 out of 100, putting its RM program in the low-risk category based on NARA criteria.
- Effectively managed, monitored and facilitated the transfer and disposition of agency records to the Washington National Records Center – approximately 42,000 cubic feet of storage space
- Performed a risk assessment on the NIH Records Program to identify potential risks, formulated approaches to mitigate all identified risks and developed corrective action plans to address and diminish risks.
- Participated as member of the NIH OD Continuity of Operations Plan (COOP) Working Group for advisory assistance for issues related to vital records; updated COOP Vital Records Section as needed.
- Provided input and guidance for new social media policies; provided advice to agency staff on electronic, web and social media records issues.
- Expanded strategic communication and outreach efforts to agency through the implementation of formal Record Liaison meetings, expansion of SharePoint Records Management Website, and participation in the HHS Records Council meetings.
- Expanded efforts in training and education to agency staff; invited outside subject matter experts from NARA, WNRC and HHS to address specific records issues and challenges.
- Expanded the NIH RM SharePoint site and populated it with additional tools, templates and information to ensure a more streamlined and standard approach for handling various records processes. Increased transparency in sharing information through surveys, meeting minutes, event information, and announcements.



3.9.4 NIH Future Records Management Initiatives

- Expand efforts to update agency retention schedules, adopting NARA recommended approaches using media neutral, big bucket and flexible scheduling methods.
- Identify and incorporate tools that will result in more efficient and cost-effective records management practices.
- Continue to review new and revised NIH-wide policies to ensure records compliance.
- Assess and evaluate new regulations, policies or mandates affecting records management; develop strategies to adopt new requirements and ensure compliance.
- Register and implement the NARA ARCIS Database for all NIH WRNC transactions.
- Register and implement the Electronic Records Archives through NARA for transferring electronic records for retention and provide instruction to Records Liaisons for use of the NARA Electronics Records Archives.
- Develop agency specific on-line Records Management Awareness training module.
- Continue to provide targeted training and briefings to scientific and administrative staff across the agency.
- Continue to administer the NIH Records Management Program, leading daily operations, satisfying customer service requests, addressing the agency requirements and NARA requirements.

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 Enterprise Architecture (OEA). One FTE has been assigned to the OS Records Management program in addition Records Managers and Records Liaisons have been established within each of the 18 staff divisions. These assignments are informal (e.g., not in position descriptions and/or performance elements).

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 General Counsel (OGC)
- Office of Global Affairs (OGA)
- Office of the Inspector General (OIG)
- Office of Intergovernmental and External Affairs (IEA)
- Office of Medicare Hearings and Appeals (OMHA)
- Office of the National Coordinator (ONC)
- Office of the Assistant Secretary for Health (OASH)
- Office of Security and Strategic Information (OSSI)

3.10.3 OS Records Management Accomplishments in 2011

- Completed records scheduling workshops in March and July of 2011 designated for Records officers and Records Managers: 60 attendees were trained and received certification. Following completion of the training OS STAFFDIV Records Managers acquired the capability to establish draft records disposition schedules for submission to the NARA for approval. As a result, 120 draft records disposition schedules were received by the OS records management team for processing.
- Provided additional records scheduling workshops as requested for developing OS records disposition schedules: approximately 55 one-on-one sessions provided to records managers and program leads which involved business analysis and records analysis to determine the appropriate length of retention.
- Provided ad hoc trainings: approximately 75 formal office-specific training sessions and presented 26 new employee orientation sessions along with HHS Office of Human Resources.
- Submitted a records disposition authority (SF-115) for the official briefing books of the Secretary of the Department of Health and Human Services and the high-level officials in the Immediate Office of the Secretary. Approved by the Archivist of the United States on August 9.
- Participated in NARA Electronic Records Archives (ERA) system pilot: HHS OS was selected by NARA to be one of the 30 federal agencies to participate as a pilot agency. As a result, beginning in March 2011, OS transitioned into the ERA system as a mandatory process for scheduling records, accessioning permanent records regardless of format, and transferring permanently valuable electronic records to the National Archives. 16 OS records disposition schedules have been input into the ERA system, and 8 have been approved by the Archivist.
- NARA Semi-annual report on scheduling electronic records: Achieved a 94% electronic systems scheduling completion rate in March 2011, and 92% completion rate in September 2011:
 - March 2011
 - Identified 88 electronic systems, 81 approved e-systems schedules, 2 e-systems schedules were submitted to NARA and are pending NARA approval and 5 are pending scheduling.
 - September 2011
 - Identified 92 electronic systems, 84 approved e-systems schedules, 1 e-system schedules were submitted to NARA and are pending NARA approval and 7 are pending scheduling.
- Completed and submitted the 3rd Annual NARA and GAO Mandatory Self-Assessment



- Supported HHS RO and OGC with communication to appropriate OS STAFFDIVs on numerous ongoing litigation holds.
- Established and implemented a Records Transfer Master form: Distributed standard form to all OS STAFFDIV RMs to ensure the appropriate and continuous transfer of OS Federal records by departing senior officials as well as any departing HHS employee.
- Launched the OS Records Management Helpdesk Mailbox in order to continually seek to improve our goal to provide first-class records management support to OS customers as well as improve ongoing efforts to bring about records management awareness
- Held recurring OS Records Management Council meetings
- Served as lead contact during negotiations with senior budget analyst in the Office of the Assistant Secretary of Finance and Resources (ASFR) to close-out business regarding the FY2011 “modification” and FY2012 NARA Inter-Agency Agreement for records storage/services

3.10.4 OS Records Management Initiatives

- Continue submitting certified STAFFDIV records disposition schedules into the NARA ERA system for the Archivist approval, and transfer of permanent (historical) records to the NARA
- Continue to work with the components to identify unscheduled program records and new e-systems, and establish records disposition schedules for the seven e-systems reported to NARA for the Semi-annual report on scheduling electronic records
- Continue updating existing STAFFDIV records disposition schedules for NARA approval as appropriate
- Proceed with negotiations via NARA and HHS Learning Management System to reactivate the Records Management Course for all OS employees e.g. federal and contractor for annual compliance
- Continue registration and implementation of Archives Records Centers Information System (ARCIS)
- Support the HHS RO in establishing a strong OS Vital Records Program
- Continue establishing STAFFDIV file plans or updates to align with reorganizations including Program Lead certification as required to ensure consistency across OS
- Continue submitting records management deliverables for SharePoint portal input
- Continue plans for collaborating records management in Enterprise Architecture (EA) process
- Continue to develop program informational materials for management and staff
- Continue implementation of the Records Transfer Master form to include supervisory approval to certify the continuous transfer of records by departing senior officials as well as any other departing HHS employee.

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 three FTEs (again as an additional duty) to assist in the program. Below is an organization chart showing four (4) Offices and four (4) Centers, all of which generate records.

SAMHSA Organization

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

3.11.3 SAMHSA Records Management Accomplishments in 2011:

- Completed scheduling of two (2) electronic record groups.
- Completed six (6) transfers of record groups to Washington National Records Center
- Issued several directives regarding maintenance of record types subject to litigation holds [examples: oil spill; health care reform; tobacco]
- Provided records management guidance to SAMHSA staff and posted on intranet in preparation for Agency-wide "clean-up day"
- Increased overall awareness of records management responsibilities in conjunction with preparation for "clean-up day"
 - As evidenced by boost in number of records management inquiries concerning OPDIV-specific record groups and associated retention periods
- Completed and submitted 2011 Annual NARA Mandatory Self-Assessment

3.11.4 SAMHSA Records Management Initiatives

- Initiate transfer of Presidential New Freedom Commission permanent records to NARA (identified during recent 'clean-up day')
- Proceed with NARA Records Management Certification training of two (2) DMS employees and one (1) Division of Technology Management (DTM) employee
- Conduct OPDIV-wide inventory of records
 - Identification of outside contractor to complete process
- Complete scheduling of three new electronic record groups



4 HHS Department Records Officer Initiatives in Calendar Year 2012

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
 - 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
 - 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
 - Coordination of OPDIV comments on regulations and guidance pertaining to records management
 - 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 2012 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%



5 Summary

In 2011, 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 83% 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 third annual NARA Government-wide Records Management Assessment;
- Implemented HHS Policy for Records Holds and procedures;
- Served a vital role in the implementation of legal holds;
- Incorporated records management language in multiple HHS Electronic Systems; 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 TRANSITION PLAN TIMELINE

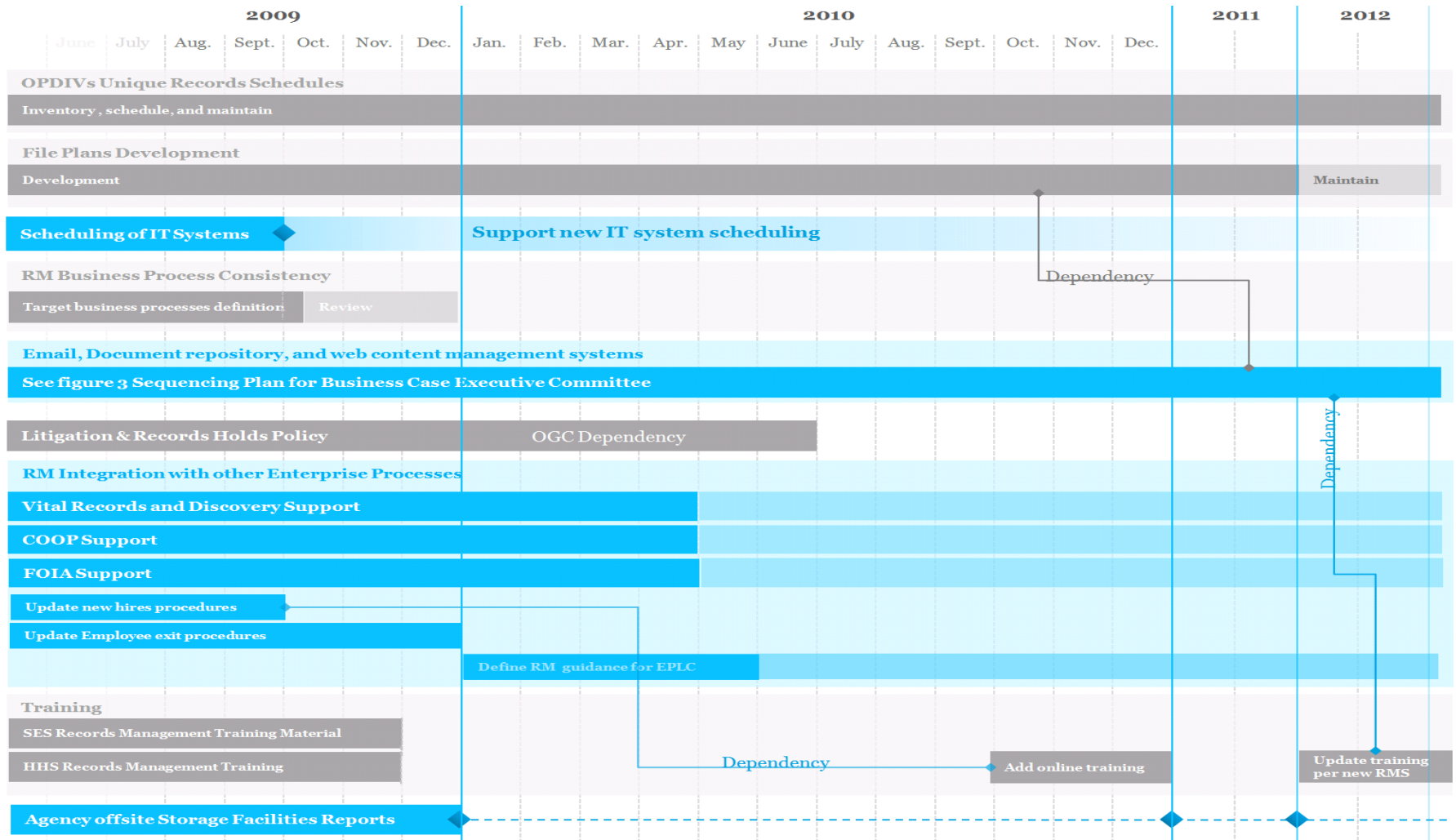


Figure 2 High Level Sequencing Plan



High Level Sequencing Plan

- OPDIVs Unique Records Schedules (Aug – Dec 2009)
 - Inventory, schedule, and maintain
- File Plans Development
 - Development
 - Maintenance (ongoing)
- Scheduling of IT Systems
 - Support new IT systems scheduling (Jan – Dec 2010)
- RM Business Process Consistency
 - Target business processes definitions
- Email, document repository, and web content management systems
- Litigation & Records Holds Policy
 - OGC Dependency
- RM Integration with other Enterprise Processes
- Vital Records and Discovery Support
- COOP Support
- FOIA Support
- Update new hires Procedures
 - Define RM guidance for EPLC (Jan – May 2010)
 - Add online training (Oct – Dec 2010)
- Update Employee exit procedures
- Training
 - SES Records Management Training Material
 - HHS Records Management Training
- Agency offsite Storage Facilities Reports

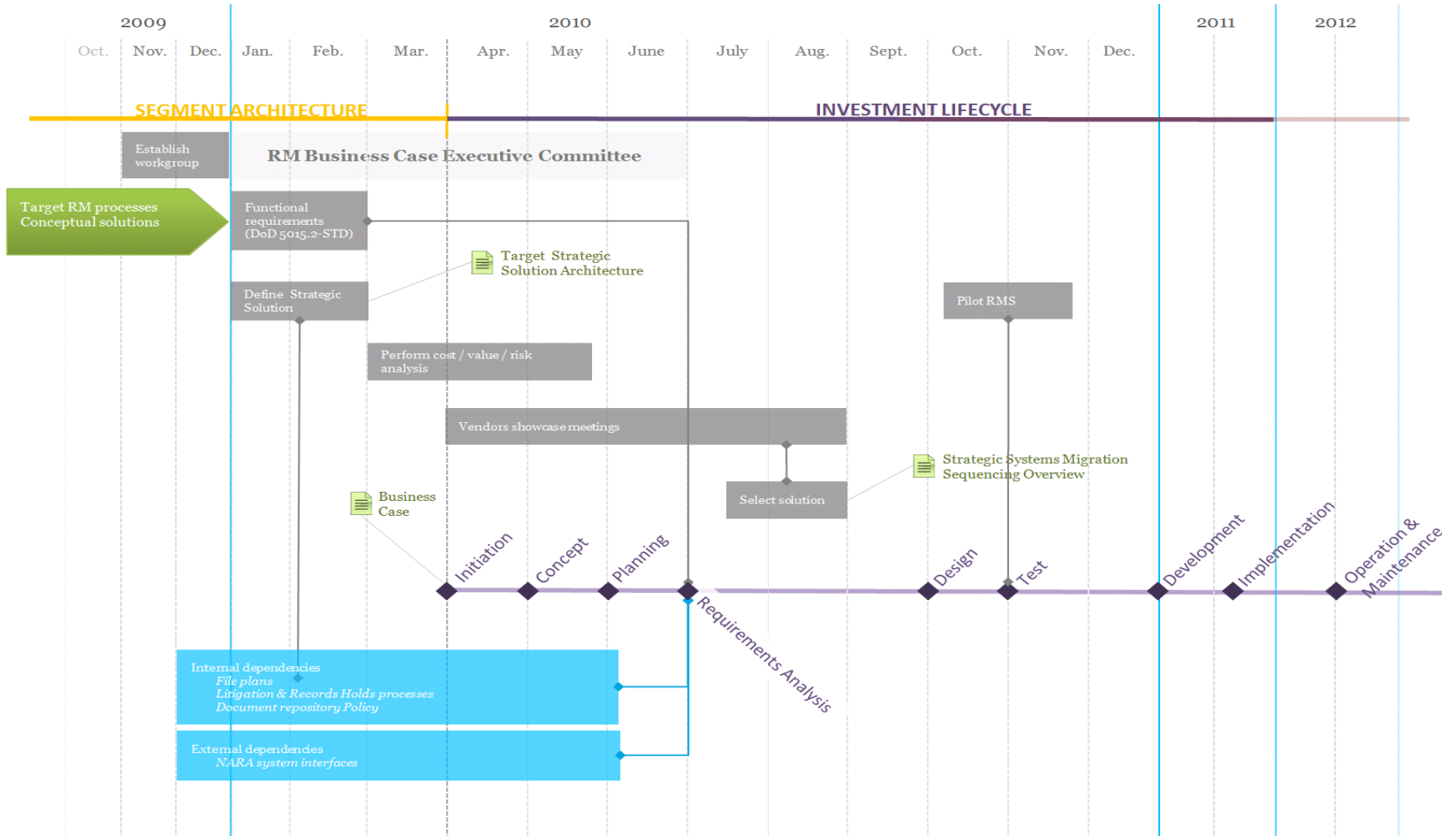


Figure 3 High Level Sequencing Plan Diagram



- **SEGMENT ARCHITECTURE (OCT 2009 – MAR 2010)**
 - Establish Workgroup
 - RM Business Case Executive Committee
 - Target RM Processes conceptual solutions
 - Functional requirements (DoD 5015.2-STD) (Jan-Jun 2010)
 - Define Strategic Solutions
 - Perform cost/value/risk analysis
 - Vendors showcase meetings
 - Select solution (July – August 2010)
 - Internal dependencies
 - File plans
 - Litigation and records Holds processes
 - Document repository Policy
 - External dependencies
 - NARA systems interfaces
- **INVESTMENT LIFECYCLE (Sept 2010 – Present)**
 - Plot RMS
 - Design
 - Test
 - Development
 - Implementation
 - Operation and Maintenance

High Level Sequencing Plan

Sequencing Plan for Business Case Executive Committee



**APPENDIX C NARA 2010 GOVERNMENT-WIDE RECORDS MANAGEMENT SELF-ASSESSMENT
SURVEY RESULTS FOR HHS**

HHS Scores by section of the NARA Report:

Agency	Section 1: Records Management Activities (Max pts 20)	Section 2: Oversight/ Compliance (Max pts 37)	Section 3: Records Disposition (Max pts 18)	Section 4: Electronic Records (Max pts 25)	Total For Component (Max pts 100)
ACF	16	18	15	19	68
AOA	18	16	11	11	56
AHRQ	20	31	16	21	88
CDC	19	25	16	18	78
CMS	20	37	18	18	93
FDA	19	34	16	21	90
HRSA	17	31	12	20	80
IHS	15	30	10	13	68
NIH	20	35	18	17	90
HHS OS	19	26	18	16	79
SAMHSA	17	12	11	19	59
HHS OS OCIO (HHS DRO responses)	17	36	5	17	75
Overall Average Score					77

HHS Risk Levels by OPDIVs:

High Risk (score of 59 points or less):	Moderate Risk (score of 60 to 89 points):	Low Risk (score of 90 to 100 points):
AOA – 56 points	AHRQ – 88 points	CMS – 93 points
SAMHSA – 59 points	HHS OS – 79 points	NIH – 90 points
	ACF – 68 points	FDA – 90 points
	IHS – 68 points	
	CDC – 78 points	
	HRSA – 80 points	
	HHS OS OCIO – 75 points (results from responses to the survey provided by the HHS DRO)	



APPENDIX D 2011 E-RECORDS SEMI-ANNUAL STATUS REPORTS CONSOLIDATED RESULTS FOR HHS

HHS E-System Numbers as of March 2011

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) (includes withdrawn schedules and schedules not yet submitted)	Percentage of All E-Systems and Series Scheduled or Pending with NARA
ACF	17	6	4	7	59%
AoA	8	7	1	0	100%
AHRQ	15	8	3	4	73%
CDC	810	425	385	0	100%
CMS	248	196	50	2	99%
FDA	135	120	12	3	98%
HHS OS	88	81	2	5	94%
HRSA	28	4	4	20	29%
IHS	12	0	0	12	0%
NIH	334	119	0	215	36%
SAMHSA	8	2	5	1	88%
TOTAL	1703	968	466	269	84%

HHS E-System Numbers as of September 2011

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) (includes withdrawn schedules and schedules not yet submitted)	Percentage of All E-Systems and Series Scheduled or Pending with NARA
ACF	17	7	3	7	59%
AoA	8	7	1	0	100%
AHRQ	15	10	1	4	73%
CDC	813	813	0		100%
CMS	262	197	51	14	95%
FDA	137	120	1	16	88%
HHS OS	92	84	1	7	92%
HRSA	28	4	4	20	29%
IHS	11	1	0	10	9%
NIH	334	119	0	215	36%
SAMHSA	8	2	5	1	88%
TOTAL	1725	1364	67	294	83%