The Reality of Information Governance Deployment at the National Institutes of Health

ABSTRACT-----

Successful implementation of Information Governance promises the much sought after integrative collaboration of business and IT to achieve enterprise goals and lead to better decision-making. Nevertheless, its design is technically complex, organizationally challenging, and, above all, politically sensitive.

NIH is a Federal agency that spans 27 separate institutes and centers involved in highly complex medical research. Within this, information serves as the bloodline linking everything together. NIH is a highly federated and semantically segmented environment where data quality and consistency are of paramount value, and needs of multiple stakeholders must be balanced and met. This presentation draws upon the experience of institutionalizing federated information governance at NIH, facilitated by the Enterprise Architect.

- What are the complex dynamics and political realities involved?
- What was proposed?
- What is the creative "structure" implemented as an outcome of the study?

BIOGRAPHY-----

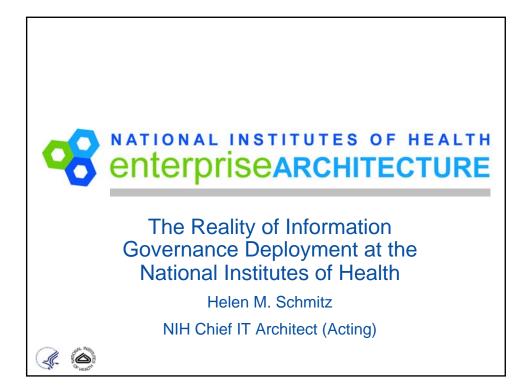
Helen McCulloch Schmitz

Acting Chief Information Technology (IT) Architect National Institutes of Health (NIH).

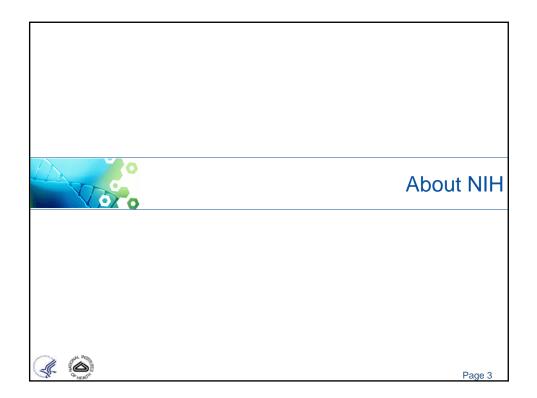
Ms. Schmitz has been with the NIH Enterprise Architecture program for seven years, three as Acting Enterprise Architect. She has over twenty years IT experience, providing leadership in support of large, complex enterprises in the private sector and the Federal Government, including the Department of Defense and civilian agencies. She worked with the American City Business Journals then the Resolution Trust Corporation. While working with EDS for seven years, she supported the Army, the Pentagon and NASD.



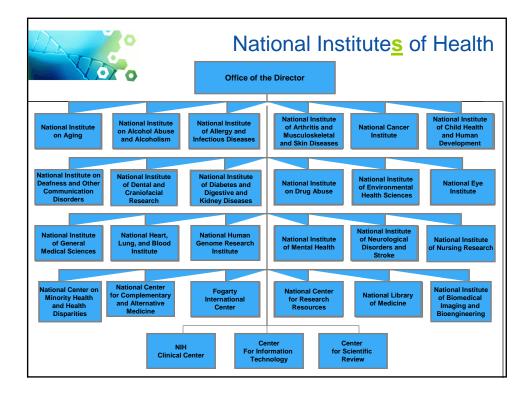
She earned a Bachelor of Arts degree in zoology from Connecticut College, then worked as a lab technician in microbiology at Wayne State Medical School, in Detroit, Michigan. Her results have been achieved through the collaborative development of NIH Enterprise Architecture and sponsorship of technology transformation initiatives with demonstrated value to NIH. She sees her role as a liaison between NIH's scientific and business organizations and those that provide IT support.

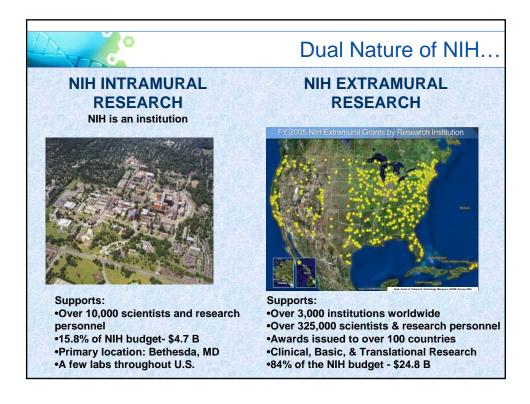






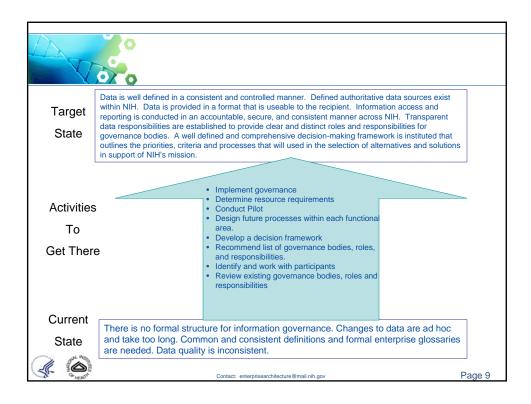


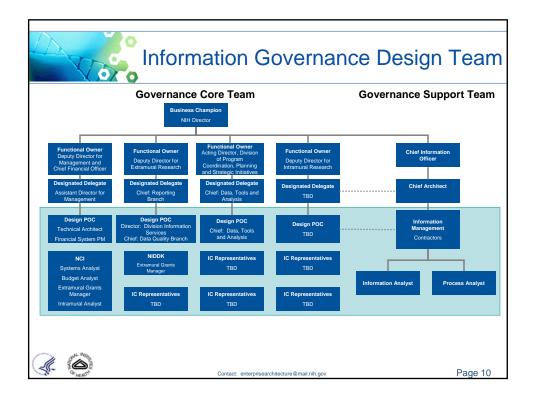




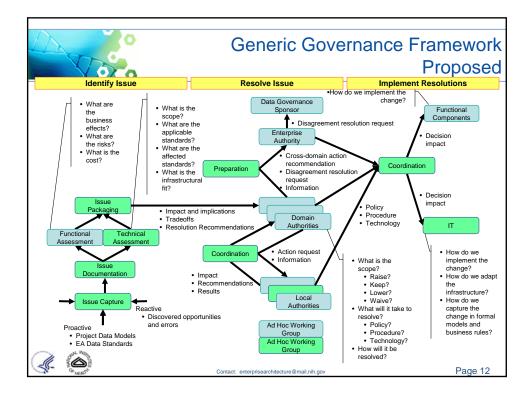


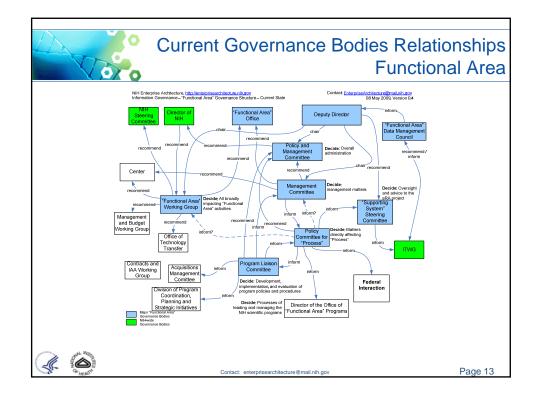


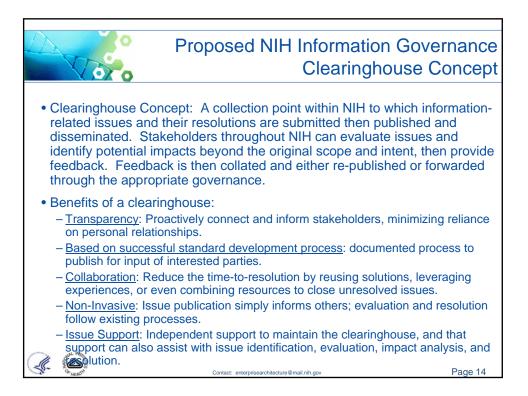


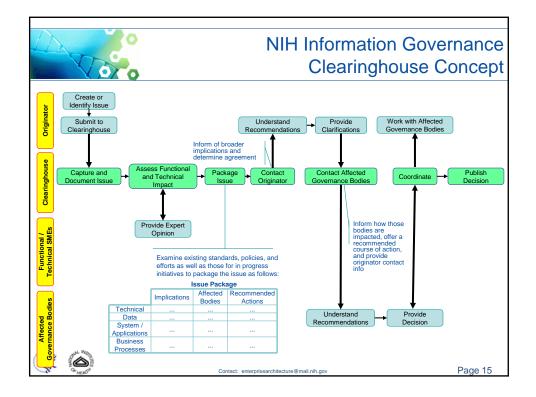


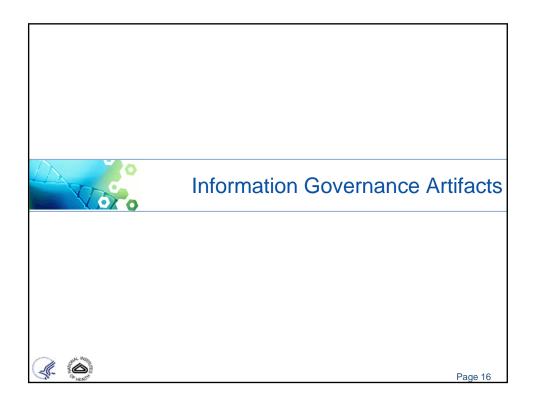


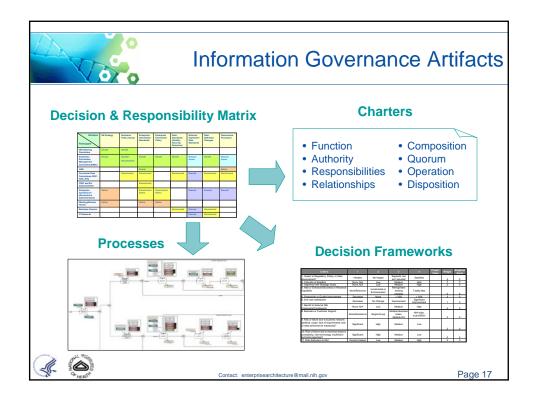


















T	20			Sa	mple	Decision Mat		
Decision Participant	IM Strategy	Business Policy Issues	Enterprise Information Standards	Enterprise Information Policy	Data Standards (Quality, Security, Retention)	Enforce/ Implement Data Standards	Data Definition Changes	Governance Processes
NIH Steering Committee	Decide	Decide						
Enterprise Information Management Committee (EIMC)	Decide	Decide? Recommend?	Decide	Decide	Decir	Resolve Issues	Decide	Resolve Issues
Architecture Review Board (ARB)			Decide		$\overline{\mathbf{D}}$			Define
Functional Data Committees (EDC, ADC, IDC)		Recommend	Recommerci		Recommend	Execute	Recommend	Recommend
ITMC EA Subcommittee			.econ end					
Enterprise Architecture (Governance Administration)	Define	6	R omr and, Den	Recommend, Define		Execute	Execute	Execute
Working Groups and Domain Teams	Define		Define	Define				
Business Owners					Recommend	Execute	Recommend	
IT Stewards						Execute	Recommend	

		Decisio	on Framework
Focus Area	Issue	Process	Artifacts
Strategy and Alignment	Informational to Business Coals Alignment Effort Selection and Prioritization Policy Development and Approval Entity Formation and Assignment Stewardship Assignment Cross-Functional Dispute Resolution	Goal Decomposition and Mapping Froject Assessment and Evaluation Funding source identification and assignment Decision rights establishment Resource Allocations Issue escalation and resolution	Strategy Maps Evaluation Factors Worksheet Costing Models Recourse Estimation Worksheet Issue Capture Template
Architecture, Standards, and Integration	Data Definition and Business Rules Capture and Adoption Data and Metadata Standards and Conventions Development and Approval Process and Data Modeling Standards Development and Approval Data Stordage, Transport, and Delivery Technical Standards Development and Approval Cross-Functional Effort Coordination	Vocabulary Term Submission and Acceptance New System Development and Data Use Change and Configuration Management New Technology Introduction	Term Validation Methodology Definition Quality Checklist Data and Architecture Models Patterns and Bricks Roadmaps
Data Quality	Data Valuation Data Metrics Determination and Monitoring Data Audit and Stewardship Assignment	Data Metric Determination Stewardship Reporting	Data Quality Dimensions Guidelines Stewardship Requirements and Skills Guidelines
Data Access and Reporting	Roles and Permissions Establishment and Assignment Logical and Physical Authoritative Data Store Identification Data Usage Guidelines and Policy Development Backup and Archiving Policy Development and Approval Retention and Disposition Policy Development and Approval	Authoritative data Source Certification Reporting Request Evaluation	Data Access Matrix Authoritative Data Source Characteristics List Data Inventorying and Categorization Guidelines
Security, Privacy, and Compliance	Security and Compliance Policy Development and Enforcement Risk Assessment and Control Valuation Incidents and Breach Response Determination	Compliance Assurance and Audit Breach Response	Anticipated Compliance Issues Statutory Compliance Impact Statements Risk Analysis Worksheet Data Classification Guidelines Response Decision Flowchart
	Contact: enterp	orisearchitecture@mail.nih.gov	Page 22

Criteria	1	2	3	4	Project Value	Weight	Weighte Score
 Impact to Regulatory, Policy, or other Requirement? 	Hinders	No Impact	Supports, but isn't required	Satisifies		4	0
2. Criticality of Deadline	None, N/A	Low	Medium	High		3	0
Alignment with Strategic Goals	None, N/A	Low	Medium	High		3	0
4. New or Enhanced Business or Research Capability	None/Removes	Incremental or Enhancement	Reengineers existing process	Totally New		2	0
5. Productivity or Quality Improvement	Decrease	None	< 10%	> 10%		3	0
6. End-user satisfaction	Decrease	No Change	Improvement	Significant Improvement		1	0
7. Benefit to External NIH Customers/Constituents	None, N/A	Low	Medium	High		4	0
8. Business or Customer Support	None/Resistance	Single Group	Multiple Business Areas, Multiple ICs	NIH-wide, mutl-OPDIV		3	0
9. Risk of failure due to business reasons (political, scope, lack of requirements, lack of clear performance measures)?	Significant	High	Medium	Low		3	0
 Risk of failure due to technical reasons (complexity, new technology, insufficient technical expertise)? 	Significant	High	Medium	Low		3	0
11. Risk Reduction to NIH	None/Increases	Low	Medium	High		2	0

