



Indian Health Service

OIT Newsletter

Office of Information Technology



November 2007

WELCOME TO THE IHS OIT NEWSLETTER

Inside This Issue

- 1 Headlines
- 2 Diabetes Awareness
- 3 Using Email More Effectively
- 4 Upcoming Events
- 5 Congratulations & Welcome

Updates

- 6 RPMS Feedback Web Site
- 7 UFMS Implementation
- 8 Contract Health Services
- 8 CPIC Update
- 9 Web Team News
- 10 iCare
- 11 Information Security Tip
- 12 Contributors

As IHS closes the fiscal year, the OIT newsletter staff looks ahead. This edition offers previews of future events, as well as other points of interest. Get ready – the future holds plenty of exciting options.

Teagan Geneviene, Editor



Diabetes Awareness

Childhood Overweight & Diabetes

More on page 2

Events and Conferences

Upcoming Conferences and Events

See page 3

Special Thanks

to everyone who participated –

UFMS is live!

See page 6

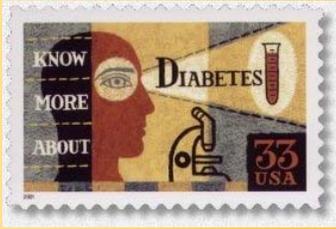
Updates

Learn what's going on in workgroups across the IHS

The IHS Security Web Site has changed.

The new address is:

<http://security.ihs.gov>



Hot Topics

Diabetes Awareness

Childhood Overweight & Diabetes

In the past 25 years, the prevalence of overweight among children in the United States has steadily increased. Since the 1970s, rates of childhood overweight have more than doubled for preschool children aged 2–5 years, and have tripled among children aged 6–11 years. Approximately nine million American children over age six are overweight.

One major result of rising childhood overweight rates is the growing prevalence of type 2 diabetes among children. Although obesity is difficult to treat and data on effective ways to prevent and treat overweight in AI/AN communities are limited, providers may still adopt the “best available” evidence.

The following four recommendations are based on the best available clinical evidence regarding the prevention and treatment of childhood overweight:

- **Recommendation 1: Body Mass Index (BMI) assessment:** Provide BMI screening and assessment for all children through age 18.
- **Recommendation 2: Breastfeeding:** Promote exclusive breastfeeding for infants.
- **Recommendation 3: Patient Health Education:** Implement universal patient health education regarding healthy eating behavior and increased physical activity to prevent and treat childhood overweight.
- **Recommendation 4: Counseling and referrals:** For patients who are already overweight or at risk for overweight, assess for complications and co-morbidities, provide counseling, and identify and refer patients to resources that promote weight-reduction, weight management, nutrition, and physical activity.

Helping Children Eat Properly: Tips

- Choose exclusive breastfeeding as the method for feeding infants for the first four to six months of life.
- Provide healthful food and beverage choices for children by carefully considering nutrient quality and energy density.
- Assist and educate children in making healthful decisions regarding types of foods and beverages to consume, how often, and in what portion size.
- Encourage and support regular physical activity.
- Limit children’s television viewing and other recreational screen time to less than two hours per day.
- Discuss weight status with their child’s health-care provider and monitor age- and gender-specific BMI percentile.
- Serve as positive role models for their children regarding eating and physical-activity behaviors.

IHS has a wide variety of *Information and Resources* available online.

Division of Diabetes Treatment and Prevention

Web Site:

<http://www.ihs.gov/MedicalPrograms/Diabetes/index.asp>

Hot Topics

Using Email More Effectively

The management of mailbox size is critical to the HHS Email system (HHSMail). Excessive mailbox size adversely impacts the amount of time required to manage mailboxes within Indian Health Service. This article lays out a “best practices” approach to sending attachments via email, as well as general email etiquette to ensure appropriate management of the volume of email messages and mailbox size. This will help us effectively manage our mail system and help to avoid additional costs for email service in the future.

Originator Etiquette

- An effective **subject line** is essential. An informative subject line helps you and your message recipients view, file, search, and prioritize messages efficiently. Messages that arrive in your inbox that have been flagged as Priority or flagged Urgent should contain important information, not a false alarm.
- A subject line should state exactly what the message is about — and nothing more. Most recipients can prioritize messages for themselves.
- Try to limit message text to one screen so the reader can quickly peruse the message for highlights and main points. Also, stay on topic and avoid long dialogs or discussions via email.

Recipient Etiquette

- Establish **email time**. Set aside regular periods during the day when you can read and respond to your email messages. It is best to set time aside both in the morning and afternoon. For instance, read and respond to emails from 8-10 AM and 1-3 PM.
- Outlook provides the ability to use folders to organize the inbox. Create subfolders and organize your email into those folders.

General Etiquette for Effective Communication

- Select an **appropriate tone** based on the level of formality you deem necessary. It's advisable to be a little more formal during the first contact email, adopting a more casual tone in subsequent messages.
- Don't fill your messages with acronyms like “OTOH” (on the other hand), “BFN” (Bye for now), or even those that are specific to your expertise because chances are that some will not know the meaning.

Best Practices for Emailing Attachments

- Using the HHSMail system for sending attachments in non-work related email messages is prohibited per *HHS IRM Policy for Personal Use of Information Technology Resources, HHS-OCIO-2006-0001*, dated February 17, 2006. This policy can be found at: <http://www.hhs.gov/ocio/policy/2006-0001.html>.
- If a personal email is received from anyone inside or outside the IHS, these should be deleted immediately.
- When sending work related attachments, ensure they are less than 2 Megabytes (MB) in size.

Guidance for applying these “best practices” can be found in the quick reference “HHSMail Best Practices and Mailbox Management” found online at:

<https://workgroups.ihs.gov/sites/hhsmail>.

Further guidance on IXOS archiving can be found at the above site in “FAQ for IXOS Archiving.”

We will have more tips for you in future issues of the IHS OIT Newsletter, including tips from fellow employees on how they successfully manage their email.

Stay tuned!

Hot Topics

Upcoming Events and Conferences

The coming months offer many opportunities for learning and networking; here are a few examples:

- **Making Data Count: Measuring Diabetes and Obesity in the Indian Health System**

The IHS Division of Diabetes Treatment and Prevention offers a conference that will benefit both new and experienced data users. It will address diabetes and obesity in the Indian health system. See the Making Data Count Web site:

<http://conferences.thehillgroup.com/conferences/makingdatacount/index.html>

The conference will be held in Tucson, AZ, December 18-20, 2007.

- **Annual IHS National Combined Councils Meeting**

February 3-8, 2008, in San Diego, CA

The National Councils (Clinical Directors, Chief Executive Officers, Chief Medical Officers, Oral Health, and Nurse Consultants) for Indian health host this annual meeting. An exciting and informative program is planned to address Indian Health Service/tribal/urban program issues and offer solutions to common concerns throughout Indian country. For more information go to the following link:

<http://www.csc.ihs.gov/training.cfm>



- **Tribal Self-Governance Annual Conference**

Scheduled for April 27 – May 1, 2008, the next Tribal Self-Governance conference will be held in Las Vegas, NV. For information updates go to: <http://www.tribalselfgov.org/>

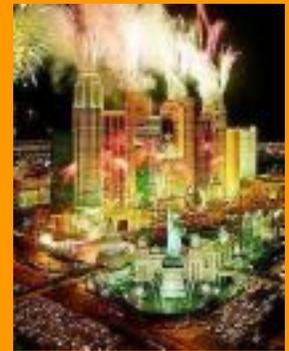
- **2008 Indian Health Information Management Conference (IHIM)**

You may be used to referring to it as the "tech conference," but expect the event to be mentioned by this new name. There was no conference for 2007, but it will be back for '08!

The conference planning group is currently hammering out the details, so the particulars are still under wraps. However, the intended date for the conference is May 12-16, 2008. The theme will be *Managing Health Information Technology to Improve Performance and Outcomes*. We will bring you details as they become available, in future editions of the IHS OIT Newsletter.



Orange County, CA



Las Vegas, NV



Congratulations & Welcome

Announcing...

Robert G. McSwain

Robert "Bob" McSwain has taken on the position of Acting Director of the Indian Health Service, having served as Deputy Director of the Indian Health Service (IHS) since February 2005. Mr. McSwain's role has been central to the workings of IHS. During his tenure, he has received two Presidential Rank Awards for Distinguished and Meritorious service. We can be sure that he will provide strong leadership for the IHS in serving as our Acting Director. OIT is looking forward to working closely with Mr. McSwain in the coming months.

Christopher Mandregan, Jr

Christopher Mandregan, Jr. has been designated as the Acting Deputy Director of IHS. Mr. Mandregan began his career with the IHS in 1986. He has received awards including a Public Health Service Special Recognition Award for Productivity from the Assistant Secretary for Health, HHS, and a Presidential Rank Award for Meritorious Service.

Randy Grinnell

Randy Grinnell now serves as the IHS Deputy Director of Management Operations. He has served in a variety of environmental health program and management assignments at IHS. Mr. Grinnell began his IHS career as a Commissioned Officer in 1976. In this position, he will be responsible for providing management direction to the IHS program offices, including implementing agency goals and mission; providing overall organization management to improve agency performance; developing strategic plans; and planning, directing, and evaluating the operations of the Headquarters functions, authorities, and responsibilities in support of the Director.

Chuck Gepford

The Office of Information Technology (OIT) is pleased to have Mr. Charles "Chuck" Gepford come aboard as our new Deputy CIO. Mr. Gepford comes to IHS from the Smithsonian Institution. While at the Smithsonian, Chuck was responsible for the operations and maintenance of the Smithsonian network throughout the United States and Panama. In this capacity, he also oversaw an enterprise-wide network upgrade, as well as the design and implementation of an enterprise-wide Voice over Internet Protocol (VoIP) telecommunications system for the Smithsonian.

**In everyone's life,
at some time, our
inner fire goes out.**

**It is then burst into
flame by an
encounter with
another human
being.**

**We should all be
thankful for those
people who
rekindle the inner
spirit.**

Albert Schweitzer



Reminder

RPMS Feedback Web Site

The **RPMS Feedback** page was developed to facilitate the ability of end-users to influence enhancements to the RPMS system. Through the feedback page, you can let the Office of Information Technology know your suggestions for new features to RPMS applications, or how to make them function better to support the work that you do. Each Feedback entry is reviewed by subject matter experts who are responsible for the particular application, and if the suggestion appears to be feasible it is added to the enhancement list.

To provide feedback on an RPMS application, go to the RPMS home page at www.ihs.gov/cio/rpms. On the left side of the page, click the RPMS Feedback link. This will take you to a page with the feedback entry form. Enter your name and e-mail address to ensure that OIT can contact you if needed. Then select the application name, if known, or select "Other" from the end of the list. Select the Category ("Application Problems" or "Suggested New Functionality") and the Priority ("Routine" or "Urgent" – your call). Then enter a Subject line that describes the issue, and enough detail in the Comment section to make your recommendation clear and understandable.



RPMS Feedback - Windows Internet Explorer

http://www.ihs.gov/cio/rpms/index.cfm?module=feedback&option=add&newquery=1

U.S. Department of Health and Human Services
Indian Health Service
The Federal Health Program for American Indians and Alaska Natives

RPMS Feedback

Search Our Site For:

Advanced Search

IHS HOME ABOUT IHS SITE MAP HELP

Resource and Patient Management System

RPMS

Information Technology Resources

RPMS Feedback

RPMS Home

RPMS Feedback

RPMS Web Coordinator

Login Register

Required plug-ins to navigate this site:

Acrobat

IHS Plug-in Page

RPMS Feedback

Feedback

As part of our effort to improve RPMS and keep it relevant and useful, the Office of Information Technology has set up a process to collect feedback from users. Please complete the form below if you would like to make a comment about an RPMS application or suggest a future functionality.

Please do not use this form to ask for help on how to use RPMS. Your best resource for help on RPMS is your local site manager. Your best resource for help on the Electronic Health Record is your local Clinical Applications Coordinator (CAC) or super-user. If you enter feedback for application problems, your message will be routed to the RPMS Help Desk. You are also invited to contact the [Help Desk](http://www.ihs.gov/GeneralWeb/HelpCenter/Helpdesk/index.cfm) at (888) 830-7280 <http://www.ihs.gov/GeneralWeb/HelpCenter/Helpdesk/index.cfm>.

We will attempt to acknowledge all requests, and although we cannot guarantee that all suggestions will become part of RPMS, we believe that your input is critical to the successful evolution of the system. Thank you for contributing.

Enter your comments in the form below. All fields are required [*].

✓ Name First Last

✓ Email

✓ RPMS Application Selection Required

✓ Category Selection Required

✓ Priority Selection Required

✓ Subject

✓ Comment

Add Attachment(s)

Accessibility -- Disclaimers -- Website Privacy Policy -- Freedom of Information Act

Please note that the feedback page is not a substitute for user support. If you are having problems using an RPMS application, please contact your local application super-user, Clinical Application Coordinator, or Site Manager. If they cannot resolve your issue they will escalate it to your Area support resources or to the OIT Help Desk. The feedback page is intended to be used mostly for enhancement recommendations, but it also serves as an alternative method for reporting problems that do not need an immediate resolution.

Please feel welcomed to use the feedback page to let us know what you think about the RPMS health information system. If you have suggestions, questions, or comments about the feedback page – well, enter them on the feedback page.

Updates

UFMS Implementation Update

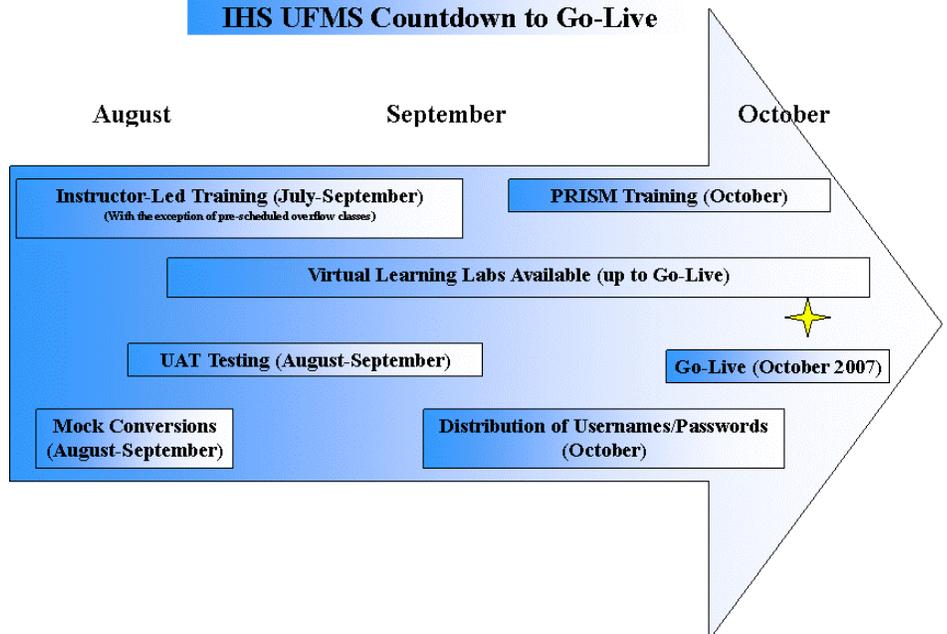
Numerous people have been steadfast in their efforts toward deployment of the integrated Department-wide Unified Financial Management System (UFMS). The Project Team worked diligently to prepare our users for the cutover to the new system. It was a massive undertaking and we are grateful for the contributions of every one who participated.

The following illustration will give you an idea of just how much was accomplished in the past months. Note the key activities:

Get more UFMS information from the many links listed on this Web site:

<http://intranet.hhs.gov/ufms/>

IHS UFMS Countdown to Go-Live



Further IHS UFMS project information can be found at <http://intranet.hhs.gov/ufms/ihs.html>.



Updates

Contract Health Services

The OIT has been working with CHS to develop an interface with CHS/MIS (Contract Health Services Management Information System) and UFMS. In preparation for the conversion to UFMS, OIT has converted all CHS CORE documents to UFMS documents. OIT is in the process of developing an Automated Reconciliation program for CHS, which will replace the WEBFERS program that has been eliminated with the implementation of UFMS. (This will not be completed until the spring of 2008.) Jeanette Kompkoff is the OIT lead on this project and can be reached at Jeanette.Kompkoff@ihs.gov.

CPIC Update

Do you know what the OMB circular A-11 part 7, Exhibit submission is?

It's that time of year again – budget submission time. The Capital Planning and Investment Control (CPIC) staff around the country is busy with the hectic rush of submitting the Budget Year (BY) 2009 budget and Office of Management and Budget (OMB) Exhibit 300s. An OMB Exhibit 300 is comprised of the supporting documentation that provides a high level summary of Agency IT investments. According to the OMB Circular, "All IT investments must clearly demonstrate the investment is needed to help meet the agency's strategic goals and mission." The OMB Exhibit 300 is one component of an agency's overall budget submission and contains the business case information for the investment. IHS has two Exhibit 300s that are submitted to OMB for review and scoring – Resource and Patient Management System (RPMS) and Infrastructure, Office Automation, and Telecommunications (IOAT) investments.

Each year OMB issues the A-11 Budget guidance in early summer which starts the process. The A-11 guidance document identifies the changes that have been made to the next budget year Exhibit 300 submission, and can be found at <http://www.whitehouse.gov/omb/circulars>. The agency's business case information is entered into the Program Management Tool (PMT), which is Primavera ProSight. Prior to actual submission to OMB, all of the HHS OPDIVS submit the exhibit 300s to HHS for ranking. This ranking is done according to quality of the business case and the performance of the investment (based on cost and schedule variances over the last year). The IHS RPMS investment ranked #2 and the IOAT investment ranked #7 out of 96 investments in the overall HHS Investment Portfolio for BY09.

Resource information for
Project Managers and other
interested staff!

<http://www.ihs.gov/cio/cpic/>

Updates

News from the Web Team

Before you use an outside contractor for your Web development on www.ihs.gov, head over to the [IHS Web Team's homepage](#) and see a handful of the great sites we have created.

Stop!

Web services are available to any group/division in IHS and you are guaranteed a site that is compliant with all federal/HHS/IHS standards, not to mention great support.

For more information about what the web team can make for you please email or call the IHS Web Manager LTJG Michael McSherry. If you have already contracted out your work and have not talked with anyone on the web team concerning site requirements, please visit the [Web developer community website](#) and contact us before you go any further in the development process.

New Sites!

We are pleased to announce the following new sites that are live or are about to go live:

- **Web Account Management System** – This site provides a complete list of all the websites found on IHS.gov with description, the account manager, content manager, date last updated, notes, and reports. For more information on this you can contact Michael McSherry.
- **Loan Repayment** – This dynamic website allows for tracking of all applicants for loan repayment and their fiscal year competitions simplifying the jobs for the Division of Health Professions Support. For more information on this application contact Catherine Alleva.
- **NC4 Patient Education Handouts** – A new part of the NC4 sites that handles categorizing patient education handouts. This section adds functionality for searching, submitting and reviewing of handouts. This site can be found here: <http://www.ihs.gov/NonMedicalPrograms/NC4/pe/index.cfm?module=Search&option=all>.
- **Medicare-like Rates** – This new site information on how to take advantage of Medicare-like rates along with training opportunities and FAQs. This site can be found here: <http://www.ihs.gov/NonMedicalPrograms/mlri/>.



On the Web Horizon

We have dozens of projects in the works, but one that will be the most noticeable is the IHS.gov redesign. As you may have noticed our IHS.gov website has looked the same for about the last six years and is overdue for a redesign. This new layout/format will be much easier to navigate; it will have a fresh new appearance; each area of the site will have categorized news/events specific to the section and much more!

Suggestions, comments or concerns about any IHS website can be submitted to

michael.mcsherry@ihs.gov

Updates

iCare: A Population Management Tool

The Office of Information Technology (OIT) is pleased to announce the national deployment of iCare. This Resource and Patient Management System (RPMS) application was deployed on May 29, 2007. Many sites are using this tool on a regular basis and the feedback is great!

What Is iCare?

iCare (BQI) is a Windows-based graphical user interface (GUI) component of the IHS RPMS that presents diverse patient data in one user-friendly view. IHS initiated this population health care management project to provide an easy-to-use tool with multiple uses to a wide variety of providers.

Current Features:

The initial version of iCare will provide IHS providers the ability to view patient data in a "population-centric" way of thinking. This will assist the user in identifying trends in care and increase awareness of the services that patients need by highlighting the status of key clinical prevention and treatment measures.

User-defined patient lists (panels) can be created, sorted and filtered in a variety of ways to form the core functionality of iCare. The Windows-based GUI application makes panel creation more intuitive for end users by providing a variety of customizable ad hoc search criteria, including standard elements such as age, gender, community, and visit dates.

iCare also features 3 unique, routine background processes:

1. Auto tagging of patients with one or more clinical diagnoses
2. Display of national performance measures for panels as well as individual patients
3. Flag displays to make users aware of Abnormal Labs; Hospital Admissions; Emergency Room Visits; Unanticipated Returns to the Emergency Room

Who Should Use iCare and Why?

Any provider who needs to identify a group of patients for long-term management or to create a temporary list should think about using iCare. Do you fit any of the following scenarios?

- I am a nurse at a facility that assigns a primary care provider to each patient. Every day, I want to create a list of scheduled patients for two different doctors in my clinic.
- I want to identify which of my patients are considered overweight so I can recommend nutrition counseling.
- Because providers at our clinic have performance goals related to annual GPRA clinical measures, I want to identify which of my patients are missing key clinical data.
- Our Women's Health clinic wants to focus on two clinical performance improvement initiatives this year. We want to identify the performance problem areas for female patients between ages 18 and 50.
- I am one of two part-time case managers for a group of children, and I want to create a patient list that we both can use.

Training:

There are 3 types of training:

1. iCare – Technical Overview Session
2. iCare – Nuts and Bolts
3. The Practical Use of iCare

All training for iCare is by WebEx. This way you are able to attend training from the comfort of your own office or conference room. You can access the training schedule by going to the iCare Web site: <http://www.ihs.gov/CIO/ca/icare/index.asp> and clicking on the training link.

If attending a live WebEx is not practical at this time, you can also listen to a recorded session by going to the WebEx Web site <https://ihs-training.webex.com/mw03021/mywebex/default.do?siteurl=ihs-training> Click on 'Recorded Sessions' on the left side of the page.

Updates

Information Security Tips

From: Cathy Federico, CISSP, and our Security Team

Security Myth

Myth: Let's say my computer has been infected by a worm. If the worm is not hurting my computer or bothering me, it's not a problem.

Fact: More and more, Bad Guys are creating and spreading worms that infect thousands of computers, enlisting them as "zombies" in "botnets."

A "botnet" is a collection of compromised computers ("zombies") infected by a worm or other malware, which places them under the control of a hacker without the knowledge of the computer owner. If your computer is "zombified," you might not notice any change--except perhaps that it might run slower than usual. That slowness might not bother you, but your computer could be responsible for infecting hundreds of other computers without your knowledge. Infected systems pose a double threat. Not only do they send out malware, but they also serve as robot soldiers in warfare between Internet crime gangs.

Don't allow your system to be taken over and used by criminals. Install and maintain good quality anti-virus and firewall software. Keep the software on your system patched and up to date. Use care when browsing the web. Also, if you have questions about the security of your system, have it checked out by a computer professional.

Scams and Hoaxes

Subject: Microsoft Update Email Scam Makes another Comeback

Bait: Phony emails, which have subject lines like "Microsoft Security Bulletin MS07-0065," and claiming that a zero-day vulnerability has been discovered in the Microsoft Outlook email program. They go on to warn recipients that "more than 100,000 machines" have been exploited via the vulnerability in order to promote medications such as Viagra and Cialis.

Recipients are encouraged to download a patch which, it is claimed, will fix the problem and protect their computers from attack by hackers.

Clicking on the embedded link does not take computer users to Microsoft's website, but to one of many compromised websites hosting a Trojan horse.

Security Tip: Microsoft *never* sends out patches or updates by email. There are *no* exceptions.

Additional information is available online at the following site. However, you may have to access this link from home, as it may be blocked by your IHS computer:

http://blogs.pcmag.com/securitywatch/2007/06/beware_of_fake_microsoft_outlo.php



The IHS Security Web Site has changed!

The new address is:

<http://security.ihs.gov>

The IHS Security Web Site is your one-stop place to find:

- IHS security policy and procedures
- Forms
- Templates
- General User Security Handbook (the user bible to their responsibilities related to IHS information and information systems)
- Technical and Managerial Handbook (the Mgr/IT Technical bible to their additional responsibilities related to IHS Information and information systems)
- Frequently Asked Questions
- IT Glossary
- IT Security Newsletters
- And much, much more!

Please take time to review this site.

Thanks for your support.

Security of IHS Information and Information Systems is *Everyone's* responsibility.

Contributors

Teagan Geneviene: Editor
Shannon Mike: Associate Editor

Tammy L. Brown: Albuquerque, NM
Theresa Cullen, MD, MS: Rockville, MD
R. Frank Martin: Rockville, MD
Michelle Riedel: Albuquerque, NM
Kelly Moore, MD: Albuquerque, NM
Howard Hays, MD, MSPH: Phoenix, AZ
Emily Taylor-Norris: Rockville, MD
Cindy Gebremariam: Tucson, AZ
Carl Gervais: Albuquerque, NM
Amy S. Patterson: Sacramento, CA



About the IT News

The IT News is published several times throughout the year by the IHS Office of Information Technology. All articles and article suggestions are welcomed for consideration.

If you would like to submit an article for approval, or have any questions regarding this publication, please contact Teagan Geneviene at: teagan.geneviene@ihs.gov

All articles should be no longer than 1200 words in length and should be in an electronic format (preferably MS Word). All articles are subject to change without notice.

