

Looking Ahead



Information Technology-based business solutions make a unique contribution to the success of healthcare delivery. OIT is committed to remain on the leading edge of technological innovation thereby improving the delivery of healthcare to Native American and Alaska Natives.

As we move towards the future, we shall work collaboratively with the IHS, Tribal, and Urban Programs, and with all of our constituents.

RPMS will continue to innovate in the arena of clinical, as well as public and population health IT. Activities focused on meeting these goals include:

- Remaining current with the requirements for MU
- Finishing the work required to implement ICD-10
- Completing the development, testing, and release of the work begun under ARRA, including a number of new GUI applications and substantial enhancements to the Practice Management suite of applications

Ultimately, the modernization of RPMS will include development of browser-enabled applications, facilitating the use of a “software-as-a-service” model and allowing remote hosting and support of RPMS if a site so chooses. RPMS strives to be in alignment with the priorities set forth by the ISAC.

IOAT plans to meet the demands of tomorrow with solutions implemented today. Through long-range planning and clear direction, the IOAT investment expects to move from the role of a simple provider delivering essential services to that of investment for foundational future activities.

NPIRS has a commitment to improve the quality, accuracy, availability, and delivery of NDW information. The objectives are to ensure faster, more comprehensive, and easier access to data, and to strengthen information security. NPIRS also plans for the integration of clinical and administrative data to improve healthcare operations and facilitate long term clinical accountability. This will be accomplished through increased collaboration with stakeholders and other agencies to pilot and establish an enterprise level multi-dimensional database environment for business intelligence.

TELEHEALTH is excited about what the future of the program can offer to Indian health in terms of great value and potential. One key area of focus for 2011-2012 will be strategic planning with clinical, administrative, business, technical, and other stakeholders on a plan to fund and implement Telehealth expansion across a broader segment of the Indian health system.

INFORMATION SECURITY is an ever-growing part of IT and patient privacy. Plans are in place to improve the enterprise information security posture to ensure the confidentiality, integrity, and availability of information and information resources. IHS Security will implement Agency-wide minimum security standards, consistent with Federal guidelines and best practices, and all standard hardware and software components and configurations will meet all Federal guidelines. IHS Security will ensure IT investments have documented plans for addressing security at each stage in the investment lifecycle, including incorporation of security into current IT capital plans.

CPIC will improve overall information capital planning to ensure that all IT spending is done efficiently and effectively. All IT development, modernization, and enhancement is consistent with the EPLC process and accurately identifies CPIC funding requirements. Budget requests will be responsive to CPIC priorities and planning will align with CPIC requirements. CPIC will also establish and maintain consistent Agency-wide policies and procedures to manage IT investments and projects.

ENTERPRISE ARCHITECTURE will create an IHS Blueprint to capture the business structure and the technical architecture in order to enhance healthcare operations. This will include the overall picture of IHS, gap analyses of business structure and technical architecture, and a transition strategy for attaining the future look of IHS. EA will establish, maintain, and share technical standards that will be integrated into the enterprise infrastructure and operations. An oversight process will be established to monitor and enforce enterprise standards compliance.



Annual Planning Cycle and GPRA

Annual Planning Cycle

The OIT APC was developed to improve the planning and delivery of IT to its customers. Implementation of the APC will begin in FY2011 with production of the OIT Annual Plan.

The APC is a set of five repeatable planning events that are aimed at increasing the efficiency, effectiveness, and productivity of the OIT. As the planning cycle is executed, information is included from all previous planning activities to ensure that the planning process has up to date information and best practices and lessons learned from experience.

The goal of the annual process is to produce necessary planning documents for the OIT. The APC will create a constant flow of strategic and tactical information and activity based on customer input, and knowledge and insight gained from current and past work activity. It will provide consistency and continuity to the OIT planning process and ensure that all of the planning documents are interrelated, overlapping, and consistent.

Annual Planning Cycle Sequence Planning Activities and their respective Outputs are:

Sequence Planning	Activity Output:
Annual Report	Feedback into Strategic Plan
Customer Survey	Annual Report and Survey Results
Strategic Plan	Strategic Goals and Objectives
Tactical Work Plan	Strategic Milestones
Spend Plan	Funds Allocation

As the APC process is implemented, its work products will show the important relationships between planning, customer feedback, funding, operations, and performance.

IHS recognizes the need to collaborate with others to continue improving its healthcare delivery capabilities.

Our long-standing relationships with the Tribes and other organizations, such as the Department of Veterans Affairs, allow for the leverage of resources and sharing of knowledge when it comes to clinical practice management and administrative reporting and interoperability.

Government Performance and Results Act

The Government Performance and Results Act (GPRA) requires each Federal Agency to demonstrate that it is using funds effectively to meet its mission. The law requires the Agency to have a five-year Strategic Plan in place and to submit Annual Performance Plans and Reports with its budget requests.

The IHS employs an enterprise-wide approach to Information Technology planning, investments, and standards. The Information Technology Strategic Plan provides a strong foundation for effective information resource and technology management in current and future years. IHS uses a collaborative strategic planning process that includes I/T/U technology stakeholders.

Achieving both the short- and long-term health goals in the face of the increasing health status disparities experienced by the American Indian and Alaska Native People represents a challenge for the IHS system.

The Clinical Reporting System (CRS) is the RPMS tool that the IHS uses to collect and report annual clinical performance results to the Department of Health and Human Services and to Congress. Each year, the OIT CRS Team updates the CRS software to implement whatever reporting changes may be required.

The 2010 clinical performance measures are compared to those from 2009 in the table below.

Measure Type	APC Closeout	2010 Results	2009 Results	Change
DIABETES MEASURES	Poor Glycemic Control	18%	18%	0%
	Ideal Glycemic Control	32%	31%	+1%
	Controlled Blood Pressure <130/80	38%	37%	+1%
	Low Density Lipoprotein Assessed	67%	65%	+2%
	Nephropathy Assessed	55%	50%	+5%
	Retinopathy Exam	53%	51%	+2%
DENTAL MEASURES	Dental Access	25%	25%	0%
	Sealants placed	275,459	257,067	+18,392
	Topical Fluoride-Patients	145,181	136,794	+8,387
IMMUNIZATIONS	Influenza 65+	62%	59%	+3%
	Pneumovax 65+	84%	82%	+2%
	Childhood Immunizations	79%	79%	0%
PREVENTION MEASURES	Pap Screening	59%	59%	0%
	Mammography Screening	48%	45%	+3%
	Colorectal Cancer Screening	37%	33%	+4%
	Tobacco Cessation	25%	24%	+1%
	Alcohol Screening (FAS Prevention)	55%	52%	+3%
	DV/IPV Screening	53%	48%	+5%
	Depression Screening	52%	44%	+8%
	CVD-Comprehensive Assessment	35%	32%	+3%
	Prenatal HIV Screening	78%	76%	+2%
	Childhood Weight Control	25%	25%	0%

In Closing...



The IHS is facing some of the most profound changes in its history. It is simultaneously faced with the challenges of improving the health of the American Indian and Alaska Native People, providing for local control of resources to Tribes wishing to exercise their options of self-determination, and demonstrating performance results consistent with the IHS responsibilities to the American Indian and Alaska Native People whom we serve.

In the most fundamental ways, IT is transforming how we work:

- Tribal members are beginning to have direct access to their Personal Health Records.
- Telehealth is providing quality health-care to remote locations previously underserved.
- Front-line workers access vast quantities of information near instantaneously.
- Decision support systems take employees through complex decision trees and logic.

For many people, the idea of a structured process represents change, which is often unwelcome; it is thought to be overly burdensome and even costly. In reality, successful project management offers important benefits to ensure goals are effectively accomplished for the benefit of the organization.

- Customers may access remote information directly through integrated voice response systems, electronic bulletin boards, and the World Wide Web.
- IT enables fundamental change in IHS business processes to be made with a minimum of technical risk.

Not only are the IT needs of the customers changing, but the capability and breadth of information technologies are changing as well. Accordingly, the OIT will continue to develop and adapt information systems strategies and policies to meet these changing times; the current IHS information structure and network will continue to evolve.

The OIT plays a major support role in meeting the IHS health care mission by providing a broad spectrum of IT services. To optimize the value added by IT to the IHS, continuous communication and collaboration with the I/T/U customers about business needs is absolutely necessary. The OIT is responsible for fully supporting the business needs of the IHS through the application of appropriate technology. Strategic planning is a critical activity that prepares OIT to meet current business needs and to anticipate future IT needs.

The OIT strives to continually enhance its operational capabilities, improve the manner in which services are delivered, and upgrade the IHS IT infrastructure through judicious investment of available resources. Through collaboration with the Indian people, the IHS and Tribes are exploring innovative and creative ways to improve essential health programs and provide administrative support to Indian communities.

The OIT views each planning session, work activity, and accomplishment from the perspective of how will or how did the resulting action contribute value to the IHS and its ability to meet its mission. We are aware that an OIT accomplishment must be celebrated in terms of how it made a difference, not just as an achievement by the OIT.

This overview is one way of communicating how OIT's activities and accomplishments contribute added value to the IHS, Tribes, and Urban Programs.

Your comments and feedback are welcome!