Federal Health Architecture
Vision, Goals, Objectives and Milestones
Revised August 21, 2003

Vision

Citizens are safer, healthier, and have improved access to health related information and services as a result of leveraging an effective and efficient mechanism for making sound decisions which impact national health.

Goals

1. Improved coordination and collaboration on national Health IT Solutions.

   Objectives:

   1.1. Create a collaborative body to consider and prioritize the lines of business, starting with public health monitoring, that offer the greatest opportunities for increased health benefits through a coordinated partnership across the national health community.

   Action: Define the structure and composition of this collaborative body, which should represent all stakeholders, including federal, state and local health communities.

   Action: Develop the processes that will yield consensus from all members[1] on the critical elements for an effective Federal Health Architecture to guide health information and service solutions.

   Action: Leverage existing interagency health collaboration efforts by developing a registry of groups/committees/organizations/bodies/etc. that are working on similar or related initiatives, along with their intentions, goals, and milestones.

   Action: Develop and execute a communications strategy for regular dissemination of information and cross-agency interaction.

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[1] Members represent broad list of stakeholders, come to consensus, and brief stakeholders.

1.2. Develop a proof-of-concept on one vertical business process[2] (e.g. food safety, surveillance).

Action: Demonstrate the benefit of the Federal Health Architecture by developing a target architecture for public health surveillance systems that can then be used to facilitate interoperability between surveillance systems across multiple agencies and in the national health community.

Action: Conduct an assessment of existing and planned public health systems and supporting architectures to begin the process of identifying opportunities for synergy, collaboration and possible cost savings.

Action: Develop a performance monitoring strategy for public health surveillance that includes at a minimum:

- Improvement of cycle time for the transmission of public health alerts.
- Reduction of data acquisition costs through the elimination of redundant collections.
- Establish common items of interest to be collected by all appropriate agencies.
- Expose opportunities for cost savings through the licensing and maintenance at the federal level.

1.3. Create the process for coordinating the development and maintenance of the Federal Health Architecture.

Action: Examine lessons learned from similar activities (e.g. Consolidated Health Informatics).

Action: Develop and publish the process, change management, and framework required to manage the Federal Health Architecture.

1.4. Ensure collaborative health IT investments align with Federal priorities.

Action: Collect Presidential, Congressional and Secretarial health priorities and develop joint recommendations for how information systems, supporting technologies and other IT initiatives help fulfill program needs.

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[2] A vertical is a subset of a Line of Business.

1.5. Promote the adoption and implementation of standard reference models throughout the national health community.

Action: Develop a mechanism to promote and track the adoption and implementation of standards supporting the FHA throughout the national health community.

Action: Develop a process to effectively coordinate the use of the grant and cooperative agreement programs by all agencies to consistently implement the FHA standards throughout the national health community.

Action: Include the input of the national health community within a change management effort.

2. Improved efficiency, standardization, reliability, and availability of comprehensive health information solutions.

   Objectives:

   2.1. Iteratively discover high–level current state of government Health IT Solutions and initiatives. (Focus on gathering info)

   Action: Using an iterative approach with each vertical, determine the current state of government health IT architecture and initiatives, and include a strategy for accomplishing the target.

   Action: Provide findings of current Health IT Solution evaluations mapped to the Federal Enterprise Architecture Model & Presidents Management Agenda.

   Action: Assess the findings of current health IT solutions to collect information for the service level model. From the assessment, identify opportunities for maintenance and licensing cost reduction through economies of scales and consolidated purchases by leveraging existing procurement mechanisms. (i.e. GSA SMARTBUY)

   Action: Establish agreement among key government agencies to incorporate information interoperability standards for public health into internal business processes, including information technology architecture.

   2.2. Determine the future state (target or to be) of government health IT Architecture and initiatives, and include a strategy for accomplishing the target.

   Action: Using an iterative approach with each vertical, determine the future state (target or to be) of government health IT architecture and initiatives, and include a strategy for accomplishing the target.

Action: Provide findings of current Health IT Solution evaluations mapped to the Federal Enterprise Architecture Model & Presidents Management Agenda.

Action: Assess the findings of current health IT solutions to collect information for the service level model.   From the assessment, identify opportunities for maintenance and licensing cost reduction through economies of scales and consolidated purchases by leveraging existing procurement mechanisms. (i.e. GSA SMARTBUY)

Action: Establish agreement among key government agencies to incorporate information interoperability standards for public health into internal business processes, including information technology architecture.

2.3. Establish a change management process for identifying, evaluating and facilitating the use of emerging technologies that are appropriate for ensuring continued improvements to the nation's ability to prepare for and respond to public health emergencies.

Action: Examine lessons learned from similar activities (e.g. HIPAA; Consolidated Health Informatics).

Milestones

1. Assemble a team of appropriate members from the FHA participants to provide guidance in the development of artifacts, such as the FHA business case, that can be vetted by the full collaborative body.

   Date: August 1, 2003

2. Assemble a team to develop an assessment of existing public health surveillance systems and supporting architectures to begin the process identifying opportunities for synergy, collaboration and possible cost savings.

   Date: September 15, 2003

3. Develop the FHA Exhibit 300 to establish the Federal Health Architecture.

   Date: September 8, 2003

4. Establish process and a collaborative body to review, prioritize and coordinate FHA activities.

   Date: September 30, 2003

5. Establish a collaborative body to promote adoption of the FHA for broad use across the international health community.

   Date: October 31, 2003

6. Publish Architecture for the public health surveillance line of business.

   Date: December 31, 2003

7. Iteratively assess current IT investments in health systems across the government and define best practices for standardization.

   Date for Plan: January 31, 2004