

HHS IT Strategic Performance Measures

The following table contains the Enterprise IT Strategic Performance Measures for the *HHS Enterprise IT Strategic Plan FY2003 – FY2008*.

IT Objective	IT Strategic Performance Measure	Data Source	Timing	Measure Definition	Measure Rationale
Goal 1: Provide a secure and trusted IT environment					
Objective 1.1 Enhance confidentiality, integrity, and availability of IT resources.	1.1.1. Percentage of IT systems listed in the most recent FISMA report that have completed security certification and accreditation.	Secure One HHS	Short-Term	Percentage of owned, leased, operated, or maintained IT systems included in the Department's most recent annual report or quarterly update required by the Federal Information Security Management Act of 2002 (FISMA) that have been certified and accredited. This measure is part of the quarterly FISMA update and of the Secure One HHS Management Plan of Action (MPA).	Indicates the Department's review, assessment, and protection of its major IT systems. A low percentage would alert senior leadership that a high number of the Department's major IT systems have not be fully reviewed against potential vulnerabilities.
	1.1.2. Percentage of both operational and developmental IT systems with Privacy Impact Assessments completed and posted on the web.	Secure One HHS	Short-Term	Percentage of owned, leased, operated, or maintained IT systems, including developmental and operational, that have been completed Privacy Impact Assessments (PIAs) and whose PIAs are made publicly available via the web. This measure is part of the Secure One HHS Management Plan of Action (MPA).	Indicates the Department's progress in completing mandated PIAs on its IT systems. A low percentage would alert senior leadership of the need to increase the Department's efforts to complete these assessments.

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<p>Objective 1.2</p> <p>Protect IT assets and resources from unauthorized access or misuse.</p>	<p>1.2.1. Percentage of total computer security incidents occurring during the reporting period that were categorized as Level 1 computer security incidents.</p>	<p>Secure One HHS / SOC</p>	<p>Short-Term</p>	<p>Percentage of all computer security incidents (defined as "a violation, or an imminent threat of a violation, of an explicit or implied security policy, acceptable use policies, or standard security practices in a computing or telecommunications system or network, excluding certain adverse events causes by natural forces such as floods, fires, electrical outages, excessive heat, etc.") that were categorized as FEDCIRC Level 1 incidents. Level 1 incidents are defined as "possible life-threatening activity, or [that] affects classified or critical systems or information." Examples include root compromises, user compromises, denial of service/distributed denial of service attacks (no matter how successful or unsuccessful), website defacements, and detection of malicious logic.</p>	<p>Indicates HHS' unmet need to protect and safeguard its IT assets from unauthorized use or misuse. A high percentage of incidents should alert senior leadership to an increased need to improve the Department's IT security safeguards.</p>
	<p>1.2.2. Percentage of OPDIVs that offer employees training on IT misuse issues, to include software piracy.</p> <p>(Revised 7/21/04.)</p>	<p>OPDIVs</p>	<p>Long-Term (Q1FY06 or later)</p>	<p>Percentage of the Department's operating divisions (OPDIVs) that educate appropriate OPDIV personnel regarding misuse of IT assets and the policies and procedures adopted by the OPDIV to honor software copyrights.</p>	<p>Reflects Departmental progress in implementing protections from misuse of IT resources, as directed by the Executive Order on Computer Software Piracy (Executive Order 13103, September 30, 1998). A low percentage would indicate lagging compliance on software piracy issues. A high percentage should enable the Department to communicate success on this requirement.</p>

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Objective 1.3 Enhance security awareness department-wide.	1.3.1. Percentage of HHS employees who have received IT security training during the last twelve months.	Secure One HHS	Short-Term	Percentage of full-time and part-time HHS employees and contractor staff with access to the Department's IT networks or IT assets, that received formal IT security training within the last twelve full calendar months. Training consists of classroom courses, computer-based training, independent studies, refresher courses, or any other type of instruction accepted by the Department.	Provides HHS with an understanding of the extent of its efforts to increase employee awareness and understanding of security issues. A low percentage would indicate to senior leadership a need to increase the availability, capacity, or completion rates of its IT security training initiatives.
	1.3.2. Percentage of HHS employees with significant IT security responsibilities who hold a current IT security professional certificate. (Revised during July 7th OPDIV workshop.)	OPDIVs	Short-Term	Percentage of full-time and part-time HHS employees who have been identified by their OPDIVs as having significant IT security responsibilities, who have completed IT security certification training courses and hold a valid, non-expired, certificate provided by an organization recognized by Secure One HHS as an acceptable certification issuing authority. (As of March 2004, 188 employees have been identified as having significant IT security responsibility.)	Indicates the professionalization of IT security among the Department's employees who hold the largest degree of responsibility for IT security. A low percentage would communicate to senior leadership a need to strengthen the knowledge and skills of these human capital assets.
Objective 1.4 Ensure that IT security is incorporated into the lifecycle of every IT investment.	1.4.1. Percentage of Exhibit 300s submitted during the most recent budget cycle that scored a 4 or above on the Security & Privacy section.	OCIO	Medium-Term (Q3FY05)	During the most recent submission of Exhibit 300s, the percentage of exhibits that scored either 4 or 5 in the Security & Privacy (Part II, Section II.B) section.	Indicates the proportion of proposed IT investments that adequately include security elements in their respective business plans, as determined by OMB. A low percentage would indicate to senior leadership a lack of planning for security controls for IT investments or a lack of training in the proper communication of security controls in budget documents.

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Goal 2: Enhance the quality, availability, and delivery of HHS information and services to citizens, employees, businesses, and government					
Objective 2.1 Provide an intuitive one-stop solution to quickly and reliably deliver information for public access.	2.1.1. Self-service rate of Web Portal visitors. (Revised on 8/1/04)	Web Portal Initiative	Short-Term	During the reporting period, the percentage of visitors to the Frequently Asked Questions (FAQs) sections of the "hhs.gov" websites managed by the HHS Web Management Team, who <u>did not</u> submit an inquiry or question via the site, as reported by the eService Center Site Effectiveness Report.	Provides HHS with a sense of how many visitors to these sites are able to find the information they require without requesting additional support. A low percentage would alert senior leadership of potential barriers to the efficient distribution of information to the public via the Department's Web Portal.
	2.1.2. Number of web pages identified as not compliant with Section 508 during the period.	OCIO	Medium-Term (Q3FY05)	During the reporting period, the number of confirmed web pages, Department-wide, for which a lack of compliance with a Section 508 issue or requirement has been detected. Identification of these pages can be accomplished via the Watchfire tool or any other tool that detects these violations.	Indicates the Department's compliance with Section 508 accessibility requirements for web pages. A high number would alert senior leadership of a potential need to train staff on accessibility requirements for web pages being developed and maintained by the Department.

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Objective 2.2 Leverage web services to conduct business securely with customers and stakeholders.	2.2.1. Percentage of targeted business transactions not overdue to be web-enabled.	OCIO	Medium-Term (Q3FY05)	Percentage of business transactions identified by the Department in its most recent Government Paperwork Elimination Act (GPEA) report, exclusive of transactions labeled as "Transactions that will not be completed," that have not been fully web-enabled or made electronic but whose "Date of Completion" has not passed. At this time this measure tracks transactions that are not overdue for completion, regardless of the achievement of internal project milestones.	Provides HHS with a sense of progress on its efforts to conduct more of its business via the Internet. A low percentage would communicate to senior leadership that the Department has fallen behind on its efforts to make its business transactions available online.
	2.2.2. Percentage of total volume of web-enabled transactions that is conducted electronically during the reporting period. (Tabled during July 7th OPDIV workshop.)	OPDIVs (Transaction Owners for completed transactions)	Short-Term	Percentage of the total volume of all "Completed Transactions", as identified by the Department in its most recent Government Paperwork Elimination Act (GPEA) report, that are sent, received, submitted, or otherwise conducted using magnetic media (i.e., diskette), electronic mail, or electronic data interaction. Facsimile is not considered an electronic transaction.	Indicates the volume of business transactions that the Department and its stakeholders are conducting electronically, versus by traditional methods. A low percentage would indicate a low utilization of the available electronic methods of conducting business with the Department.
	2.2.3. Percentage of targeted grant programs not overdue to be migrated to Grants.gov.	Grants.gov	Short-Term	Percentage of grant programs identified by the Department for migration to Grants.gov that have not yet been migrated, but whose scheduled completion date has not passed. At this time this measure tracks grants that are not overdue for completion, regardless of the achievement of internal project milestones.	Reflects the Department's progress on the Grants.gov initiative. A low percentage would communicate to senior leadership that the Department has fallen behind on its efforts to make its grant applications available online.

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<p>Objective 2.3</p> <p>Ensure the availability and dissemination of information in preparation of or in response to local and national emergencies or other significant business disruptions.</p>	<p>2.3.1. Percentage of IT systems listed in the most recent FISMA report that have a contingency plan.</p>	<p>Secure One HHS</p>	<p>Short-Term</p>	<p>Percentage of owned, leased, operated, or maintained IT systems included in the Department's most recent annual report or quarterly update required by the Federal Information Security Management Act of 2002 (FISMA) that have a contingency plan in place.</p>	<p>Indicates a basic level of preparedness for local and national emergencies or other significant business disruptions. A low percentage would alert senior leadership to the need of proper planning for emergencies that might affect the Department's systems.</p>
	<p>2.3.2. Percentage of IT systems listed in the most recent FISMA report for which contingency plans have been tested.</p>	<p>Secure One HHS</p>	<p>Short-Term</p>	<p>Percentage of owned, leased, operated, or maintained IT systems included in the Department's most recent annual report or quarterly update required by the Federal Information Security Management Act of 2002 (FISMA) report that have a contingency plan that has been tested at least once.</p>	<p>Indicates a moderate level of preparedness for local and national emergencies or other significant business disruptions. A low percentage would alert senior leadership to the high level of uncertainty as to the effectiveness of the Department's contingency plans for IT systems.</p>
	<p>2.3.3. Percentage of tested contingency plans for IT systems listed in the most recent FISMA report that met the plan's recovery requirements.</p>	<p>Secure One HHS or OPDIVs</p>	<p>Long-Term (Q1FY06 or later)</p>	<p>Percentage of owned, leased, operated, or maintained IT systems included in the Department's most recent annual report or quarterly update required by the Federal Information Security Management Act of 2002 (FISMA) that have a tested contingency plan whose test results met the plan's recovery requirements.</p>	<p>Indicates a high level of preparedness for local and national emergencies or other significant business disruptions. A low percentage would alert senior leadership to the inadequacy of the Department's contingency plans for IT systems.</p>
<p>Objective 2.4</p> <p>Provide technologies enabling HHS employees to work collaboratively and share knowledge.</p>	<p>2.4.1. Percentage of HHS e-mail systems that are currently interoperable.</p>	<p>Enterprise Email Initiative</p>	<p>Short-Term</p>	<p>Percentage of e-mail systems that have been transferred to "@[opdiv].hhs.gov" and whose platforms and directory services have been made compatible, as outlined by the Enterprise E-mail Strategy initiative.</p>	<p>Provides HHS with a sense of the current interoperability and consolidation of its e-mail systems. A high percentage will communicate success in improving the ability for employees across all OPDIVs to communicate and work collaboratively.</p>
	<p>2.4.2. Average time required to fulfill employee requests for Section 508 accommodations.</p>	<p>DoD CAP Liaison</p>	<p>Short-Term</p>	<p>Average number of days elapsed between the initiation of an employee request for accommodation under Section 508 of the Rehabilitation Act of 1973, as amended (29 U.S. C. 794d), and the completion or fulfillment of such request.</p>	<p>Indicates the Department's responsiveness to requests from employees with disabilities for IT equipment or technology that would enable them to work more productively. A high number of days would indicate a need to expedite the fulfillment of these requests.</p>

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Goal 3: Implement an enterprise approach to information technology infrastructure and common administrative systems that will foster innovation and collaboration					
Objective 3.1 Establish a basis for consolidated infrastructure to achieve interoperability and communication among operating divisions.	3.1.1. Percentage of milestones and sub-milestones reached by the HHS.Net Initiative on or before their scheduled due date, according to the initiative's current work breakdown structure.	HHS.Net Initiative	Short-Term	Percentage of milestones and sub-milestones specified in the HHS.Net Enterprise Initiative's current work breakdown structure (WBS), that were completed on or before their planned due date during the reporting period.	Provides HHS with an understanding of the current progress of its network interface and unification efforts. A high percentage communicates success in integrating on-time the Department's infrastructure to achieve interoperability and improved communication.
Objective 3.2 Improve the performance of HHS communication / network resources.	3.2.1. Percentage of HHS HQ and OPDIV networks that meet or exceed the stated Departmental uptime target during the period.	Secure One HHS	Short-Term	Percentage of HHS HQ and OPDIV networks whose uptime was equal to or greater than the Department's target uptime for its IT networks, during the previous quarter. Currently, the Department's target uptime is 99.94%. Uptime can be defined as the time a network is operational and accessible, divided by the total time in the period minus any planned downtime.	Provides HHS with a sense of the availability of its network resources across the Department. A high percentage would enable the Department to identify and communicate its success in operating and maintaining its networks.
Objective 3.3 Enable the unification and simplification of similar IT business processes and services within and across operating divisions.	3.3.1. Number of IT business processes and services eliminated during the period due to consolidation.	OPDIVs and ITSC	Short-Term	During the reporting period, number of IT business processes, services, or operations that were eliminated due to consolidation within OPDIVs or across OPDIVs. For example, if three processes were consolidated into one, then two processes would have been eliminated. Examples of process, service, or function consolidation include email server consolidation, other server consolidation, use of common correspondence control systems, use of common document management control systems, etc.	Provides HHS with a sense of the number of redundant functions or activities that it has consolidated. While actual cost savings or improvements in outputs or cycle time are not measured, this metric provides a first step towards tracking these benefits to consolidation of similar processes and services.

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Objective 3.4 Implement consolidated financial management and other administrative systems.	3.4.1. Percentage of targeted financial management systems that are on schedule for consolidation.	UFMS Initiative	Short-Term	Percentage of the total number of financial management systems identified by HHS for consolidation in the Unified Financial Management System (UFMS) that have been consolidated or that are on schedule to be consolidated based on the current work-breakdown-structure.	Provides HHS with an understanding of the progress of the UFMS initiative. A low percentage would alert senior leadership to a delay in the consolidation of financial management systems.
	3.4.2. Percentage of targeted administrative systems that are on schedule for consolidation.	OCIO	Short-Term	Percentage of the total number of administrative systems, excluding financial systems, identified by the Department for consolidation, that have been consolidated or that are on schedule to be consolidated based on the current work-breakdown-structure.	Provides HHS with an understanding of the progress of the consolidation of administrative systems. A low percentage would alert senior leadership to a delay in the consolidation of administrative systems.
Objective 3.5 Maximize the value of technology investments through enterprise-wide procurement and licensing.	3.5.1. Percent savings achieved from consolidated procurement during the reporting period.	OCIO	Short-Term	Average percent savings achieved from all IT purchases, leases and other contracts procured through a negotiated enterprise agreement during the past reporting period, calculated using the formula: $1 - \frac{(\text{Price Paid} + \text{Overhead})}{\text{Retail Price}}$	Provides HHS with a sense of the cost savings realized from centralized procurement of IT goods and services. A high percentage will communicate to senior leadership the success of the Department's enterprise licensing agreements.

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Goal 4: Enable and improve the integration of health and human services information					
Objective 4.1 Provide integrated public health information services across HHS and to private industry, first responders, other healthcare providers, and the public.	4.1.1. Percentage of IT investments that during the CPIC Select phase met the Screening process' requirements for alignment with the enterprise target architecture.	CPIC	Medium-Term (Q3FY05)	Percentage of IT investments submitted to the Capital Planning and Investment Control (CPIC) Select phase Screening process, that are met the processes requirements for alignment with the enterprise target architecture, as determined by the CPIC Select Screening process.	Indicates the integration of IT standards defined by the enterprise target architecture into proposed IT investments. A low percentage would indicate to senior leadership that the target enterprise architecture requirements are not fully recognized or understood throughout the Department.
Objective 4.2 Provide national leadership for Consolidated Health Informatics to promote the adoption of data, process, and vocabulary standards.	4.2.1. Percentage of domain areas for which recommendations have been produced regarding standards to be adopted.	CHI Initiative	Short-Term	Percentage of the domain areas identified by the Consolidated Health Informatics (CHI) initiative for which a cross-Government team has submitted a recommendation specifying the standards that should be adopted. Currently there are 24 targeted domain areas, but this number will change as the initiative enters its second phase.	Definition and recommendation of standards is a prerequisite for adopting a common health vocabulary and messaging standards across the federal government. Meeting the measure's target percentage would indicate progress in establishing these standards according to the initiative's schedule.
	4.2.2. Percentage of standards recommended for adoption that have been successfully rolled out.	CHI Initiative	Short-Term	Percentage of standards recommended by the Consolidated Health Informatics (CHI) initiative's cross-Government teams, which have been approved for adoption and publicly announced by the Secretary.	Adoption of CHI standards is a prerequisite for implementing a common health vocabulary and messaging standards across the federal government. Meeting the measure's target percentage would indicate progress in implementing these standards according to the initiative's schedule.
	4.2.3. Percentage of participating agencies with signed MOUs.	CHI Initiative	Short-Term	Percentage of the total number of agencies identified as participating by the Consolidated Health Informatics (CHI) initiative, which have signed a memorandum of understanding (MOU) specifying that they will implement the CHI standards within their organization, and also contribute in-kind resources towards the implementation of these standards across the federal government.	MOUs indicate an agency's agreement to implement the adopted health vocabulary and messaging standards across their systems and processes. Meeting the measure's target percentage would indicate progress in establishing these standards across the federal government.

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Goal 5: Achieve excellence in IT management practices					
Objective 5.1 Strengthen HHS enterprise-wide processes for collaborative IT strategic planning, capital planning, and investment control.	5.1.1. Percentage of IT investments that during the CPIC Select phase met the Screening process' requirement for alignment with the Department's business and IT strategic goals and objectives.	CPIC	Medium-Term (Q3FY05)	Percentage of IT investments submitted to the Capital Planning and Investment Control (CPIC) Select phase Screening process, that met the requirement of alignment with the strategic goals and objectives identified in the HHS Strategic Plan and HHS Enterprise IT Strategic Plan, as determined by the CPIC Select Screening process.	Alignment of proposed IT investments with the HHS Strategic Plan and the HHS Enterprise IT Strategic Plan ensures alignment with the mission and needs of the Department. A low percentage, while a good indication that the CPIC Select Screening filters are successfully identifying misaligned projects, would also alert senior leadership to the lack of integration of strategic goals and objectives in proposed IT investments.
	5.1.2. Percentage of HHS employees with IT investment oversight or technical responsibilities who have received training on creating a Business Case or Exhibit 300 for IT investments.	OPDIVs	Medium-Term (Q3FY05)	Percentage of program managers, project managers, and business sponsors with IT investment oversight or technical responsibilities for investments with Exhibit 300s, who have participated in training courses on how to create a Business Case or Exhibit 300 for IT investments, including how to align investments with strategic goals and objectives. IT investment oversight or technical responsibility refers to (1) the creation, revision, review, or approval of Exhibit 300s, and (2) management of IT project's cost and schedule to ensure that the projected benefits from the business case are pursued. Training consists of classroom courses, computer-based training, refresher courses, independent studies, or any other type of instruction accepted by the Department.	Training employees with IT investment oversight or technical responsibilities on how to create a Business Case or an Exhibit 300 will improve planning for IT investments. A low percentage would indicate to senior leadership the need for increased understanding of how IT investments must align to the strategic goals and objectives of the Department.

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<p>Objective 5.2</p> <p>Apply strong project management and performance measurement processes to critical IT projects to achieve project success.</p>	<p>5.2.1. Percentage of IT projects with Exhibit 300s that are within 10% variance of their time and budget requirements, as specified in their current work breakdown structure.</p>	<p>OCIO</p>	<p>Medium-Term (Q3FY05)</p>	<p>Percentage of IT investments with Exhibit 300s that are on schedule and budget compared to their current work breakdown structure (WBS), or whose schedule or cost overruns are 10% or less.</p>	<p>Indicates how many IT projects are on time and on budget, or within a 10% negative variance. A low percentage would alert senior leadership to delays and cost overruns on the Department's IT investments.</p>
	<p>5.2.2. Percentage of project managers of IT investments with Exhibit 300s who completed IT project management certification training.</p> <p>(Revised during July 7th OPDIV workshop.)</p> <hr/> <p>ALTERNATE MEASURE:</p> <p>5.2.2 Percentage of project managers for IT projects with Exhibit 300s that are 'Validated' or 'Validated with Exception'.</p> <p>(Proposed 08/03/04)</p>	<p>OPDIVs</p>	<p>Medium-Term (Q3FY05)</p>	<p>Percentage of project managers for IT investments with Exhibit 300s who have completed IT project management certification training courses and who hold a valid, non-expired, certificate issued by an organization recognized by their OPDIV as an acceptable certification issuing authority.</p> <hr/> <p>Percentage of project managers for IT investments with Exhibit 300s that are rated as either "Validated" or "Validated with Exception" by the Department. "Validated" refers to project managers that have met the appropriate training and experience requirements for the system/project managed. "Validated with Exception" refers to project managers that have not met all of the appropriate training and experience requirements; however, warrants an agency waiver based on demonstrated successful performance on the job. The Department will conduct initial assessments of project managers in early FY2005. Ratings assigned to each project manager will be based on the IT project managers competency areas are listed on pages 5 to 7 of the <i>OPM Interpretive Guidance for Project Manager Positions</i>.</p>	<p>Indicates the professionalization of IT project management among the Department's employees who are responsible for the IT projects that are most important to the Department's mission. A low percentage would communicate to senior leadership a need to strengthen the knowledge and skills of these human capital assets.</p>

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Objective 5.3 Develop an IT human capital plan to guide the recruitment, retention, and skill development of staff.	5.3.1. Does the HHS Office of the CIO have a current IT human capital plan?	OCIO	Long-Term (Q1FY06 or later)	Has the HHS Office of the CIO (OCIO) completed an IT human capital plan in the last five years that outlines (a) the IT skill sets needed by the Department, and (b) the activities required to recruit, retain and develop staff to meet these needs?	Reflects whether HHS has a current IT human capital plan. A "No" response to this measure would indicate to senior leadership the need to develop or update an IT human capital plan for the Department.
	5.3.2. Percentage of OPDIVs implementing the action items from the current IT human capital plan.	OPDIVs	Long-Term (Q1FY06 or later)	Percentage of all HHS OPDIVs implementing all of the applicable action items identified in or derived from the current IT human capital plan, as determined by the HHS OCIO in conjunction with the OPDIVs. Development of the Department's first IT Human Capital Plan is scheduled for FY2005. Ten sample action items from such a plan may include: (1) Develop a uniform assessment process that will allow for consistent monitoring of recruitment and vacancy data; (2) Develop a targeted marketing/outreach program for recruiting; (3) Develop a new hire follow-up process and an exit interview process for permanent and non-permanent staff; (4) Consider the best use of HR flexibilities in recruiting and retention, such as summer internships, Federal Student Loan Repayments, and others; (5) Conduct a skills gap analysis that informs the recruiting process; (6) Complete a competency model for all key occupations within the OPDIV; (7) Using the developed competency model identify education and development needs for the OPDIV employees; (8) Ensure employee performance plans are linked to OPDIV's and HHS' mission, vision, goals, and outcomes; (9) Institute a formal mentoring program to develop high-potential employees and encourage knowledge transfer from mentor to mentee; (10) Develop processes and tools to assist in succession planning and knowledge management at all levels of the organization; etc.	Reflects whether HHS is implementing the current IT Human Capital Plan. A low percentage would alert senior leadership to the need for OPDIV action in response to the HHS IT human capital plan's recommendations.

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<p>Objective 5.4 Establish and maintain IT policies and SOPs to ensure compliance with evolving Federal legislation and OMB regulations.</p>	<p>5.4.1. Percentage of relevant Federal legislation and OMB regulations that are on target for full implementation.</p>	<p>OCIO</p>	<p>Long-Term (Q1FY06 or later)</p>	<p>Percentage of Federal legislation and OMB regulations identified as relevant by HHS, for which an IT policy or standard operating procedure (SOP) exists to ensure implementation of requirements and/or compliance with mandates.</p>	<p>Provides HHS with a sense of its compliance with Federal IT legislation and OMB regulations. A low percentage indicates a lack of responsiveness to and fulfillment of legislative and regulatory requirements.</p>