Research Computing Advisory Committee

Minutes Jan 7, 2019 (taken by Erik Deumens)

Present: Paul Avery, Peter Barnes, Ana Conesa, Erik Deumens, Richard Hennig, Bill Hogan, Gail Keenan, Damon Lamb, Jeff Martens, Lauren McIntyre, Rafa Munoz-Carpena, Alberto Riva, Plato Smith, Jack Stenner, Chris Vulpe

Discussion

In December 2018, the University of Florida announced the details of the single governance structure for information technology to support all of UF and Shands hospital in Gainesville and Jacksonville. The meeting was dedicated to answering questions about the new structure. Here are the highlights of comments, questions, and answers:

- CONCERN: For this effort to be successful, the procedures must be described in a place that is easy to find for this new integrated IT community.
 - Fragments may exist, but they are distributed randomly and many are out of date.
 - Standards also must be clearly written up and easy to find.
 - o WRITE IT DOWN!
- **CONCERN**: Document the operating principles for the IT organization
 - List the procedures for accomplishing common tasks, identify the steps and the timeline of how long each step is expected to take, so that customers have a clear expectation of what is possible and normal, and what is an abnormal delay.
 - Many people have suffered delays that were months, which is unreasonable.
 Hours, days, or weeks can be appropriate depending on the nature of the requested task. Months are reasonable if the request initiates a major project.
- Why will this work better than the dysfunctional state we have now? A
 centralized solution introduces friction by layers and approval requirements.
 - The priority of a task is set by the Dean/director of the unit with the IT need, the local IT staff will simply execute any standard request.
 - On more complex matters, local IT staff will contact the IT director of the college for guidance.
 - This communication process is not envisioned as a one-way request waiting for response, but rather as a two-way conversation. For example, the faculty requester and the local IT person engaging the IT director; If they cannot decide how to proceed, IT staff from UFIT will be included in the discussion.
 - That way an existing solution can be found and implemented, or a plan can be made to make an enhancement or new development to meet the need raised by the faculty.
 - Then tickets and or projects can be created to explore, if necessary, and implement a solution.
- **CONCERN:** Several committee members named UFIRST as an example of a system that made the grant application process more cumbersome and unwieldy and slower. "It is a one-way dictatorship. Do not repeat that mistake!"

- How will the effectiveness of this new organizational structure be measured? Some metrics currently used, such as ticket response time and closure times are not meaningful, because tickets are closed before the issue is fully resolved or the request is fully implemented.
 - The primary metric will be time to completion of any request, especially the complex ones that may involve multiple tickets/tasks for completion. By involving the local IT in the process, the plan is to create a single point of contact for the faculty or staff regarding the issue or request.
 - Because the local IT reports to the dean/chair faculty and staff have true leverage over their responsiveness and performance.
- How do you plan to reduce the friction for faculty in HSC colleges doing their work in the buildings served by HealthNet?
 - The plan is to move the firewall and the umbrella of requirements to meet HIPAA compliance so that HealthNet shrinks down to the hospital and the clinics in support of clinical services.
 - Research and teaching & learning will be supported by the Academic Network Environment (NE), which does not impose the burden that stems from the requirement to operate a HIPAA compliant network.
 - Research and teaching that involves PHI will be supported by a special PHI NE, architected the same way the Controlled Unclassified Information (CUI) NE is architected today to support export controlled work, mostly in the College of Engineering.
- How will this network change affect services, like printers and storage?
 - We will work with service owners and customers to make sure their non-PHI data is migrated to storage systems that serve the Academic NE.
 - Printers and desktop support services will be set up so that they work and that the HSC IT staff can support the users on the Academic NE.
- How will this affect access to and working with HiPerGator?
 - That will not change.

Organization

Next meeting will be on Monday February 7, 2019 from 1:30-2:30 pm. The meeting will be in NPB 2165 and will be Zoom enabled for virtual attendance.

One-UF IT Governance

This document addresses the governance of Information Technology at the University of Florida (including the distributed services organizations (DSOs) and Auxiliaries) and at UF Health Shands Hospital and UF Health Jacksonville.

Responsibility and Authority

The University of Florida CIO is responsible for, and has the authority to direct, the architecture, security and provision of IT services at UF.

The UF Health CIO is responsible for, and has the authority to direct, the architecture, security and provision of IT services at UF Health Shands Hospital and UF Health Jacksonville. The UF Health CIO will have a dual report to the UF CIO and SVP for Health Affairs for activities related to UF Health, with other reporting lines to the CEOs of UF Health Shands Hospital and UF Health Jacksonville.

Where the IT interests of UF and UF Health intersect or overlap, the UF CIO and UF Health CIO will address issues through mutual cooperation in the spirit of One-UF with the UF CIO having the final decision regarding UF Information Technology matters.

Organizational Structure of Information Technology at UF

To provide efficient and effective services, UF IT will have a central component and distributed components.

The central component reports directly to the UF CIO and will be concerned largely with UF-wide IT issues

The distributed components service the colleges and other major UF units. In general, each unit will have a Director/Manager of IT, who reports to the dean/director of the unit. That dean/director will determine the special IT needs and priorities within the unit, communicate those to the Director/Manager of IT, and hold the Director/Manager of IT accountable for managing IT services within the unit.

However, the Director/Manager of IT is charged with managing IT services within the unit consistent with the UF-wide policies determined by the UF CIO. In that respect, the Director/Manager of IT is responsible to the CIO and reports to the CIO in terms of how unit needs are being met consistent with UF-wide policies.

Sub-units within a major unit, such as departments and institutes, may also have IT staff assigned to them at the discretion of the dean/director. The director/Manager of the sub-unit will determine the special IT needs and priorities within the sub-unit, communicate those to the IT staff, and hold the staff accountable for managing IT services within the sub-unit. That IT staff will also manage IT services within the unit consistent with UF-wide policies determined by the UF CIO, be responsible to the CIO and report to the CIO how unit needs are being met consistent with UF wide-policies.

Interaction with Information Technology at UF Health Shands Hospital and UF Health Jacksonville

UF Health Shands Hospital, UF Health Jacksonville, and associated clinics are supported by an IT organization under the direction of the UF Health CIO. The UF Health IT organization focuses on IT for clinical operations, although the UF CIO must be consulted whenever UF Health IT impacts on UF IT architecture, security, or services. Reciprocally, the UF CIO will consult with the UF Health CIO on matters that impinge on clinical operations.

Since services and data must move across the UF/UF Health boundary to execute the missions of both organizations, it is critical that the UF CIO and UF Health CIO work cooperatively to facilitate that movement to enable the productive collaboration between members of both organizations. This includes building, operating, and maintaining infrastructure and business processes to enable efficient sharing of data across the boundary within all legal, regulatory, contractual, and budgetary constraints. The academic operation of UF and the clinical operation of UF Health can be optimally supported by data network environments that are separated by a clean boundary with a firewall, but the intense collaboration between the members of the two organizations require efficient ways to manage potentially large and frequent data transfer across that boundary.

November 2018