

**HSC Information Services Advisory Council (ISAC)**  
**Issues – ISAC Members**  
**Draft – December 21, 2005**

***Managerial/Governance/Communications***

- Lack of centralized, high level organizational leadership to help establish policy (e.g., domain addresses, backup requirements, etc.). This is not complete centralization, but only policy issues. There should be decentralized units within each University unit (i.e., HSC, IFAS, E&G) (submitted by R. Armistead)
- Governance (e.g., who decides a website violates acceptable use policy, etc.) (submitted by R. Wears)
- While standards are important and should be maintained, flexibility, within guidelines or parameters, to meet varying needs is essential. Because of a perceived lack of flexibility and communication on the part of HSC IT, time and effort is being spent (by units) considering other alternatives. Units want more control and the option to provide some of their own services due to no input into HSC level decision making (e.g., Private IPs for the 1329/ Firewalls/ VPN's/ Proxies). (submitted by E. Shenkman)
- Need to improve interactions between HSC IT staff with knowledgeable groups like (unit/local) network staff as well as interactions with the non-technical individuals such as faculty and staff. Need for greater flexibility, greater communication, and the need to express a sentiment of partnership with the end users and with the people who work extremely hard every day at the unit level to keep entire departments up and running. (submitted by E. Shenkman)
- Composition of HSC IT committees and how input is sought from the individuals who are doing the work on a daily basis. Units want input into HSC decision making regarding IS services. (submitted by E. Shenkman)
- We are not given enough influence on infrastructure decisions to promote the best interests of the college. (submitted by R. Gronwall)
- It is often difficult for those of us who oversee the college's IT unit to know who the responsible persons are in the HSC scheme of (IT) administration. Hopefully, the ISAC may be able to provide the clear documentation of that structure for everyone in the HSC. (submitted by R. Gronwall)
- Technical ability of the individuals in responsible technical positions varies widely across the groups with some individuals not having the minimum level of skill needed to manage their systems. The hiring authority for these positions is typically a non-technical manager and who has limited resources in the area of evaluating technical talent. (submitted by H. Baker)
- Compliance with operational and security best practices are not systematically reviewed. For instance, there are whole, large departments

who allow local users to have full "Admin" rights to their workstations.  
(submitted by H. Baker)

- As a result of discussions with general managers, there seem to be significant opportunities for 'commoditization' of existing services such as email, file storage, printing and document scanning\storage. But, unless these have a central 'champion', the opportunities are typically lost in bureaucratic hand wringing and turf protection by the line technical staff.  
(submitted by H. Baker)
- Lack of approved vendors with limited support for non-approved.  
(submitted by R. Armistead)
- Research center in the HSC for the support of college research projects  
(submitted by M. Brodeur)

### ***Clinical***

- Ownership of clinical warehouse data (submitted by P. Antonelli)
- Alignment of HSC and Shands Teaching Hospital security policies and procedures (submitted by P. Antonelli)
- Common IS infrastructure (submitted by P. Antonelli)
- Cross functional support for Information Services between HSC and Shands IS (submitted by P. Antonelli)
- Cross functional support for the clinical mission (submitted by P. Antonelli)

### ***HealthNet***

- The staffing of Healthnet severely restricts service. Getting ports hot, wireless nodes installed, new switches installed, etc. can take months  
(submitted by R. Bates)
- Lack of administrative oversight, coordination, and communication.  
(HealthNet?) (submitted by R. Gronwall)
- Scheduled work is often not done on time as scheduled. Technicians work on the infrastructure and make changes that interrupt service. Technicians appear to be on their own to do whatever they see fit and often lacking an overall view of our (college) operation. (submitted by R. Gronwall)
- Explaining the difference in port costs between Healthnet and Office of Academic Technology (submitted by R. Armistead)

### ***Services***

- Continuing need for on-line testing - although there has been an expansion of facility with plans for next phase of expansion, we want to be sure this is a priority for the HSC - adequate space and discussion of future funding. (submitted by D. Williams)
- Requests for use of Blackberry by increasing number of faculty/staff - possible HSC management of centralized remote device access  
(submitted by D. Williams)
- Ability to capture audio from classroom lectures and digitalize for Internet download (submitted by D. Williams)

- Value, process and cost of becoming a Certificate Authority at HSC or UF level (ex., Verisign server at the University level). (submitted by M. Brodeur)
- Central HSC Storage Area Network (SAN) box that has segmented storage for the separate administration of each college IT dept (submitted by M. Brodeur)
- An HSC centric gatorlink email server to meet the needs of the HSC graduate and distance learning students (submitted by M. Brodeur)
- All 1329 workstation IPs are public and should be private. (submitted by E. Shenkman)
- Contingency Plans for systems failures (submitted by R. Wears)
- Disaster Recovery (submitted by J. Schumaker)
- Ambulatory Electronic Medical Record (submitted by J. Schumaker)