Meeting:	UFMS Communications Planning Meeting
Date of Meeting:	February 4, 2004; 1:00pm
Lead:	Nick Provost
Facilitator:	Kerry Joels
Recorder:	Meghan Hamilton

Attendees:

	ACF	Bill Morris
	AHRQ	
	AoA	Dan Berger (via phone)
	CDC	Jeannie McLeary (via phone)
		Paul Sharman (via phone)
		Brian Rutter (via phone)
	CMS	
	FDA	Paula Searle
	HRSA	Jill Schmid
	IHS	Dan Madrano
	NIH	Susan Corey
		John Sloviksky
	OS	
	PSC	
	SAMHSA	Ruth Brown (via phone)
		Pauline Leopard (via phone)
	UFMS PMO	Brian Benton
		Carl Love
		Drew Moreau
		Geraldine Cooperman
		Jim Mohl
		Kerry Joels
		Matt Zakielarz
		Meghan Hamilton
		Nick Provost
		Sara Matte

General

Geri Cooperman, Federal Global BTT Lead, opened the meeting by welcoming the attendees.

Nick Provost, Global Communications resource, reviewed the agenda and purpose for the meeting. The primary discussion topics for the meeting are:

- Global/OpDiv communications as they exist
- How communications reach the "end user"
- How Communications can complement the training strategy
- Frequency of communications vs. OpDiv "Go Live"
- Should communications change
- Should the global strategic plan be modified
- OPDiv Distribution List discussion

He also explained the contents of the handout packets the attendees received. The handouts included:

- Agenda
- UFMS Communications Survey that was conducted by the Global team in October 2003
- UFMS Backgrounder – a one-page synopsis of the program
- Agency-specific Distribution List – current subscribers to the UFMS Communications Distribution list broken down by agency
- UFMS Connection newsletter (December edition) - copies to take back to your agency
- UFMS Change Management Plan Appendix D: UFMS Global Communications Plan

Nick then provided a brief history of the Global communications effort, including the fact that UFMS Global Communications funding was cut over a year and a half ago, leaving the global communications under federal leadership. Also, that there has been a significant amount of turnover on the communications team at the global level in the past 2 years. The current members are Sara Matte (part-time detail from IHS), Nick Provost (part-time detail from IHS) and Meghan Hamilton (BearingPoint).

Nick then opened the floor for other agencies to share.

Paul Sharman (CDC) described the UFMS CDC communications effort and introduced Brian Rutter (new BearingPoint resource) who is now taking over the effort at CDC. Brian is currently working on a promotional campaign for UFMS with a series of posters that will launch an awareness campaign.

Reviewing Mission Next, Nick Provost led a review of the UFMS Communications Plan (Appendix D). He specifically referenced pg 3, third paragraph. He wanted to come to agreement on a global mission statement. Through discussion, the group agreed on the following mission statement

Mission: It is the mission of the UFMS communications program to ensure that the DHHS community and other stakeholder groups have available timely, efficient, concise, and relevant communications services to effectively communicate the implementation of the Unified Financial Management System.

During the discussion, several thoughts were raised that are included below:

Matt Zakielarz (Global team): We need to keep in mind that we must also communicate to the general public, non-government agencies, and the other departments. UFMS gets numerous inquiries from other departments about how we are doing.

Kerry Joels (Global team): Communications is an element of change management. People must be convinced of the change. For this purpose, how can we support our end-users and prepare them to accept the system?

Bill Morris (ACF): We need to get the word out internally in HHS to get implemented as smoothly as possible rather than marketing it to the other agencies. Most likely the systems integrators will naturally market it. Step 1 = get our people ready for UFMS.

Susan Corey (NIH): NIH is going through their lessons learned from their deployment of their Travel system. One of they key things they've found is that the reality of Communications is to keep the message clear, concise, and consistent and tell them what they need to know and when they need to know it.

They have found that at the end of the day, the end user says, "Tell me what I need to know, when I need to know it." They only want to be told what impacts them.

Also, NIH gave presentations to the managers to present to the end-users. But, in the end the managers were not very successful holding these presentations with the end user by themselves. It ended up being a joint effort between a change management person and the manager taking the message down to the end user.

Means to Achieve the Goals	Nick Provost led a discussion about the means to achieve the agreed upon mission.

- Global Distribution of Messages: Currently, the global team is using several regular means of communications: monthly eFlash and quarterly newsletter. They have a distribution list with members from each agency. The names on this list include our Steering Committee and PDC members, UFMS workshop (Configuration Workshops, CRPs etc.)attendees, Road Show attendees etc. But, the global team knows they are missing people. They need the agencies to help identify the people within their agency that should be receiving UFMS communications.

  As the agency's UFMS site team ramps up, that agency's names are taken off of the global list and put on the site distribution list.

  Sara Matte will send each agency a list of their agencies subscribers. Please update those lists and send the updates to Sara Matte at Sara.Matte@hhs.gov.

- Overview of the Global Communications Survey: The global team conducted the survey in October 2003. Nick Provost walked the attendees through several of the responses and the way in which the survey was conducted.

  The group decided that it would be appropriate to conduct a similar survey to measure the impacts of our efforts right before fiscal year end (i.e. August) and would pursue possibly creating agency-specific surveys for sites that are already up and running. The group also recommended that the survey should include a category that identifies "UFMS PMO" respondents.

  Meghan Hamilton will send out survey results by agency to the BPOC/Communications representative.

During the discussion, several thoughts were raised that are included below:

Bill Morris (ACF) – expressed concern about PSC communicating with its customers. Also, expectations have already been set with the PSC-serviced agencies on the order of the PSC implementation. If that changes, we need to be purposeful about communicating it quickly.

2.4.04 Comm. Planning Meeting Minutes.doc

Dan Madrano (IHS) – There is a need for a group of people that can come to the agencies and make presentations about UFMS when asked. Dan is looking ahead to half-day UFMS presentation to the IHS FMO in June.

Susan Corey (NIH) – Things got very chaotic nearing go-live. Changes in the system need to be communicated quickly. Communications was very closely linked to the Training during that time. Most of the messaging going out was in response to changes in the system.

Susan recommended showing the end users functionality. As much as possible link your messages to what they had been doing previously (as is vs. to be). Change in business process was very important.

Having a point person within the end user group is essential. Help Desk (run through the NIH IT shop) is also very essential.

In regards to town halls - NIH (9months out) pulled together a group of individuals (over 500 people) from all over NIH and talked about the impact Oracle would have on them and held a demonstration of the Travel Manager. The session was held in the auditorium with breakouts demonstrating different modules. She would be willing to share the concepts, handouts, presentations, and messages.

Communications to the financial community have been fairly limited at NIH because AP/AR has only been implemented in response to Oracle.

Announcements   These meetings will be held quarterly at the Twinbrook office. The global communications team will be in touch with each of the agencies to schedule the next meeting date.