

Executive Performance

NIH Establishment Guidance

FY 2022

FY 2022 Senior Executive Service (SES) and Senior Level T-42 executive performance plans must be established in [USA Performance](#) (USAP) by **Monday, December 13th**.

SL executives will be moving to the government-wide basic SL/ST system, more information to follow. At this time, SL executives will not establish their plans

Weight Requirements

The minimum weight that can be assigned to each critical element cannot be reduced less than the NIH weight prescribed below:

Leading Change	Leading People	Business Acumen	Building Coalitions	Results Driven
10%	20%	10%	10%	30%

Each IC has the flexibility to allocate the remaining 20% across the five elements; however, **no single performance element can be assigned a greater weight than the Results Driven element.**

Example:

Leading Change	Leading People	Business Acumen	Building Coalitions	Results Driven
10%	20%	20%	10%	40%

Critical Element Requirements

Critical Elements 1 – 4

- NIH and/or ICs may add Agency-Specific Performance Requirements (that may be written as competencies or specific results/commitments associated with the element)
- Agency-Specific Performance Requirements must be written at the Level 3 (Achieved Expected Results) performance level

Critical Element 5

Executives must ensure that within the Results Driven element, each performance requirement:

- Includes a minimum of two (2) and no more than five (5);
- is directly linked to the Department's and/or organization's strategic plan;
- includes measurable results describing performance at Level 3 for each result specified;
- clearly identifies results and measures by bolding **results**, underling measures, and coloring **quality indicators** in red.



Agency Specific Performance Requirement for **ALL** SES, SL (Supervisors), and SENIOR-LEVEL TITLE 42 EMPLOYEES

Critical Element 1: Leading Change (minimum weight 10%)

Agency-Specific Performance Requirement:

IT/Cyber Security

Establish effective, risk-based security controls and practices to assure the IC is protecting the confidentiality, integrity, and availability of its information and information technology resources, commensurate with the risks to NIH and consistent with NIH-wide cybersecurity policies and guidelines. Special attention and resources should be placed on the programs, systems or data resources that would result in significant harm or loss of sensitive data if they were compromised.

Critical Element 2: Leading People (minimum weight 20%)

Agency-Specific Performance Requirement:

Federal Employee Viewpoint Survey (FEVS)

Leads organizational action to:

- Understand assigned employee's work experiences
- Prioritize workforce management areas needing improvement
- Develop data-informed action plans
- Implement plans, and
- Assess progress and adjust actions to improve the workforce conditions that strengthen assigned employees' levels of commitment and capability.

Diversity, Equity, Inclusion and Accessibility (DEIA)

*HHS Specific Requirement *Both the HHS and NIH Specific DEIA Requirements must be included in all plans**

Integrates diversity, equity, inclusion, and accessibility as a key strategic mission and operational priority at all levels of the organization, which supports and champions the Department's commitment by aligning policies and practices that:

- Promote access and equity through staff selection and promotion
- Create an inclusive, equitable, and open working environment by empowering others and encouraging diversity of thought
- Develop and implements initiatives to strengthen DEIA
- Promote learning and development opportunities to advance cultural competence/DEIA

Diversity, Equity, Inclusion and Accessibility (DEIA)

NIH Specific Requirement **Both the HHS and NIH Specific DEIA Requirements must be included in all plans**

Promoting Civility and Advancing Racial and Ethnic Equity, and Support for Underrepresented Groups, including gender & sexual minorities, at NIH and in the Extramural Research Community*

- Demonstrate support for diversity, equity, inclusion, and accessibility efforts at NIH and within the larger biomedical research enterprise, including NIH staff in scientific and non-scientific roles, by identifying opportunities, making recommendations, and developing and implementing strategies to increase inclusivity and diversity within the NIH enterprise.
- Actively lead in development and implementation of IC-specific Racial and Ethnic Equity Plans.
- Utilize NIH resources to actively identify and dismantle any policies and practices that cause or enable inequities in the NIH workforce or the NIH-funded biomedical research community.
- Demonstrate support for and compliance with the updated Manual Chapter 1311: Preventing and Addressing Harassment and Inappropriate Conduct (<https://policymanual.nih.gov/1311>).

**where applicable*

Critical Element 3: Business Acumen (minimum weight 10%)

Agency-Specific Performance Requirement:

In compliance with the Privacy Act of 1974, the e-Government Act of 2002, Executive Order 13719, and HHS privacy and risk management program, the executive will: 1) Ensure all Personally Identifiable Information (PII) and Protected Health Information (PHI) with which your organization works is covered by an approved federal records schedule and that adherence to that schedule occurs regularly; 2) Ensure proper data sharing agreements are in place and being appropriately executed; 3) Ensure roles and responsibilities for data protection and privacy are clearly assigned and appropriately communicated; and 4) Ensure that any subordinate employees complete annual privacy training.

ALL SENIOR-LEVEL T-42 IC DIRECTORS

Critical Element 1: Leading Change (minimum weight 10%)

Agency-Specific Performance Requirement:

Oversight of Clinical Research Program (Applicable to ICDs with Clinical Research programs)

- Maintain direct reporting line to IC Clinical Director to ensure safe and effective care in a research

setting.

- Ensure appropriate resources are allocated to the Clinical Research Program to assure compliance with all regulatory and safety issues related to patient care and human research subjects protection, and priorities in the IC clinical research portfolio that are approved by the ICD.
- Meet at least quarterly with the Clinical Director to review a summary of the IC's past three months' intramural clinical performance data, emphasizing trends and the efficacy of performance improvement interventions.
- Meet at least twice annually with Clinical Director and Scientific Director to discuss prioritization of ongoing and upcoming intramural clinical research activities.

Critical Element 5: Results Driven (minimum weight 30%)

Agency-Specific Performance Requirement:

Result 1

- **Catalyze scientific innovation, stimulate collaborations** across the Institutes and Centers, as well as scientific disciplines, and **advance trans-NIH priorities** in at least one cross-cutting area of biomedical or behavioral research. Foster partnerships in both the public and private sectors to capitalize on existing activities and resources.

Result 2

- Enhance scientific stewardship to **increase scientific integrity, public accountability, and social responsibility in the conduct of science**. Such activities may include efforts aimed at strengthening the scientific workforce, ensuring rigor and reproducibility of research, reducing administrative burden, and engaging in proactive risk management practices.