2016 was an exciting year for the NIH Office of Human Resources (OHR) as we made significant transitions in several areas. From changes in many OHR leadership roles to embracing our One OHR approach to accomplish our mission, our updated vision, and our added values, this year provided many opportunities to refine how OHR is shifting to a consultative approach which provides options and solutions to forward IC and NIH objectives.

To realize our unified One OHR community, we knew significant changes would need to occur. These changes require the commitment of our team working in collaboration with our NIH partners to define our progress as we constantly strive to improve as an organization. In reflecting upon CY2016, I am pleased to report on significant accomplishments and provide a snapshot of some of the services our dedicated, committed OHR staff provide.

One of the most notable accomplishments during CY2016 was the stabilization of our workforce, particularly within our Client Services Division (CSD). The success of this effort was realized in large part due to our commitment to employee development and engagement. While we determined staff stabilization was a priority for us, we also placed emphasis on strengthening key partnerships to offer new and improved programs to support employees and managers, we moved forward with initiatives such as performance development and talent acquisition planning, we enhanced our focus on the quality of our services, and updated key human resources policies.

These are just a few highlights beyond performing our regular yet demanding operational requirements. I encourage you to read this report to see some of our highlighted activities for CY2016 and to learn more about our upcoming plans.

Sincerely,

Julie Broussard Berko, MPA
Annual Report: Transition
Calendar Year 2016

OHR Overview

Mission
To recruit and retain a highly skilled and diverse workforce for the NIH.

Vision
To be a catalyst for a thriving workforce that best meets the ever-changing needs of biomedical research.

Values
People, Partners, Progress

While OHR announced our leadership transitions when they took place, many of our leadership team are new to their roles. Here are the faces to put with the names.

OD: Office of the Director; OIMP: Office of Internal Management and Planning; SIG: Strategic Initiatives Group; CSD: Client Services Division; CPD: Compensation and Policy Division; DSSEM: Division of Senior Scientific Executive Management; HR SAID: HR Systems, Analytics, and Information Division; WRD: Workforce Relations Division; WSDD: Workforce Support and Development Division

Discover more of our One OHR on our website and at
In May 2016, OHR reinstated the HRAC, a monthly IC customer committee designed to increase customer input on HR strategies and priorities. The committee provides a forum for multidisciplinary dialogue on HR issues.

Here is a list of OHR’s key IC collaborators who participated the inaugural HRAC meeting:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Institute / Center</th>
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</thead>
<tbody>
<tr>
<td>Ms. Colleen McGowan</td>
<td>Deputy Executive Officer</td>
<td>Clinical Center</td>
</tr>
<tr>
<td>Dr. Rene Etcheberrigaray</td>
<td>IC Deputy Director</td>
<td>Center for Scientific Review</td>
</tr>
<tr>
<td>Dr. David Schneeweis</td>
<td>Deputy Scientific Director</td>
<td>National Eye Institute</td>
</tr>
<tr>
<td>Ms. Ellen Rolfes</td>
<td>Executive Officer</td>
<td>National Human Genome Research Institute</td>
</tr>
<tr>
<td>Ms. Kathleen O'Sullivan, MBA</td>
<td>Executive Officer</td>
<td>National Heart, Lung, and Blood Institute</td>
</tr>
<tr>
<td>Ms. Jessica Schwartz Moreno</td>
<td>Sr. Admin</td>
<td>National Institute on Aging</td>
</tr>
<tr>
<td>Ms. Judy Wongsam</td>
<td>Sr. Admin</td>
<td>National Institute of Allergy and Infectious Diseases</td>
</tr>
<tr>
<td>Dr. Wilson Compton, MD, MPE</td>
<td>IC Deputy Director</td>
<td>National Institute on Drug Abuse</td>
</tr>
<tr>
<td>Dr. Andy Griffith</td>
<td>Scientific Director</td>
<td>National Institute on Deafness and other Communication Disorders</td>
</tr>
<tr>
<td>Dr. Bob Angerer</td>
<td>Scientific Director</td>
<td>National Institute of Dental and Craniofacial Research</td>
</tr>
<tr>
<td>Ms. LaVerne Stringfield</td>
<td>Executive Officer</td>
<td>Office of the Director</td>
</tr>
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</table>
The NIH Journey

A thriving workforce in the ever-changing biomedical research sector requires a smart game plan to transition from on-boarding to NIH departure with resources at each step to navigate the way. Partner with OHR for every move for a winning play!

**Recruitment**
HR CARDS, pre-recruitment strategy meetings, hiring authorities and flexibilities

**Benefits**
NIH Leave Bank, TALX updates during life-change events, benefits resources and news, financial planning

**Employee Engagement**
NIH Employee Engagement Toolkit, NIH Directors’ Awards, Individual Development Plan (IDP) consultation, work/life balance

**Onboarding**
New Employee Orientation, mandatory training during orientation, District of Columbia, Maryland, and Virginia (DMV) community resources

**Training**
NIH Training Center, Learning Management System (LMS), leadership development programs

**Life Events**
Changing benefits, leave guidance, worker’s compensation, workplace flexibilities, qualifying life events, open season

**Risk Management**
Employee and labor relations, Civil program, policy guidance, workforce planning

**NIH Departure**
Exit survey action planning, retirement planning, workforce analysis
NIH Workforce at a Glance

NIH Onboard Trending Count

NIH on board count has been experiencing a slight decrease over the past 5 years.

NIH Voluntary Separation* & Accession Trending Counts

Voluntary separation has been experiencing an increase over the past 5 years.

*Includes both IC to IC movements and separations from NIH.

NIH Supervisory/Non-Supervisory Status

The proportion of supervisors increased from 14.87% in 2013 to 16.04% in 2017.

NIH Program Type “Other” Workforce Proportions

The proportion of non-Intramural and non-Extramural program type has decreased over the past 5 years.

Go To SMARTHR Workforce Analytics Module

For IC-Level Data and Additional Reporting Capabilities

https://smarthr.od.nih.gov

NIH Cumulative % of Employee Eligible to Retire

28% of current employees will be eligible to retire in 3 years.

NIH Adjusted Cumulative % of Employee Eligible to Retire

At the NIH level, employees stay on for 4.99 years after they become eligible to retire. Taking this into consideration, it is estimated that 6% of the workforce will retire in the next 3 years.
2016 By The Numbers

To ensure the OHR mission, vision, and values connect to the results you see, the following is a snapshot of metrics we currently track and how they connect to our purpose. Our transition to the simplified vision and addition of our core values will shape our larger strategic plan that is under development, so we can best deliver proactive solutions for NIH’s human capital management needs.

**Mission**

To **recruit** and **retain** a highly skilled and diverse workforce for the NIH.

**Vision**

To be a **catalyst** for a thriving workforce that best meets the ever-changing needs of biomedical research.

**Values**

<table>
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<th>Partners</th>
<th>Progress</th>
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<tr>
<td><strong>RECRUIT</strong></td>
<td><strong>RECRUIT</strong></td>
<td><strong>RETAiN</strong></td>
</tr>
<tr>
<td>15% More Vacancy Announcements</td>
<td>19 Executives Recruited to the NIH</td>
<td>17,030 Unique Learners</td>
</tr>
<tr>
<td><strong>RETAiN</strong></td>
<td><strong>CATALYST</strong></td>
<td><strong>CATALYST</strong></td>
</tr>
<tr>
<td>98% Annual Leave Bank Membership Retention</td>
<td>95 Trans-NIH Committees with OHR</td>
<td>158 Employee Relations Info Sessions</td>
</tr>
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Percentages reflecting a difference represent change from CY15 levels.
2016 Highlights

**SES Reform** - Co-led the OpDivs design team for SES Reform, a multi-agency group that developed a number of guides and checklists to improve SES recruitment and onboarding. NIH OHR piloted streamlined recruitment and onboarding tools built by the SES Reform teams and will continue to do so in CY2017.

**Benefits Open Season** – In addition to the traditional Benefits Open Season, OHR successfully managed the Federal Employees’ Group Life Insurance (FEGLI) Open Season, the first in 12 years, processing approximately 1,500 applications. OHR benefits staff also hosted 3 highly successful Financial Fitness Roundtables.

**Federal Employee Viewpoint Survey Administration** – OHR developed a trans-NIH FEVS communication strategy with the launch of the FEVS Communications Toolkit containing tips, a sample communications timeline, and numerous email templates. These efforts, in concert with the ICs’ individual efforts, resulted in an NIH-wide 2.7% increased response rate from 2015.

**HR Information Technology Refresh** – OHR provided over 35 Subject Matter Experts to participate in the HHS HR system modernization activities that ensured Title 38 & Title 42 business needs are met within the upgrade. OHR’s continued participation and advocacy in department led efforts assure that the technology works for NIH’s unique business needs.

**Title 42** – OHR implemented changes to the Title 42 programs, policies, and processes to further strengthen oversight and controls while making the process more efficient and consistent across NIH. Changes included revisions to the IC Directors/NIH Deputy Directors Compensation Model, the Title 42 2016 Spring Guidance, the Clinical Fellow on-call policies and rates, to name a few.

**Workforce Analytics** - Launched the Workforce Analytics module in SMARTHR to leverage predictive analytics to facilitate NIH Senior Leadership’s strategic planning and encourage a proactive approach to workforce reporting.

**NIH-wide communications** - Created and published HR News on a weekly basis including over 230 HR-related articles, communicating both policy changes and general updates on variety of subjects.

**NIH ExLP Leadership Development Program** – OHR redesigned the NIH ExLP program for high-level impact. Updates include: off-site leadership immersion to foster deeper relationships, learning, and collaboration; expanded curriculum for Change Management, Innovation, and Crisis Management; and added the amount and depth of involvement of top NIH leadership.
Services that Make a Difference

OHR services reflect our commitment to our core values and enable us to leverage resources to recruit top talent, foster an engaged workforce, promote development at all staffing levels, provide support when needed most, and foster a safe workplace throughout NIH employee’s careers.

The NIH Corporate Recruitment Unit (CRU)
**Supporting Diversity and Inclusion** –
Joined with partners in 72 events with over 22 schools with a minority majority student body.
Generated 14,883 new social media followers over five social media channels. Posted over 1000 social media items.
Increased university connections with 82 faculty and 684 students by partnering with Trans-NIH Recruitment Forum members, to create and execute a **multi-university outreach** initiative to Hispanic Serving Institutions and Historically Black Colleges and Universities.
This initiative—the NIH Road Trip, was the recipient of The OD Honors Award in 2016.

The Leave Bank
allowed me to stay home to heal, reduce my recovery time, and return to work quickly.

I am truly grateful to this program and highly recommend it to others!

NIH HR contributed to a safe and violence-free workplace—managed 148 Civil cases in CY2016 (**up 18%** from CY2015),
25 customized training sessions (**up 14%** from CY2015), and collaborating with the ORS Division of Emergency Preparedness and Division of Police to provide 33 NIH Safety and Security training sessions (**a 230% increase** from CY2015).

The Civil team also facilitated 6 training sessions to **share best practices** with external organizations including Peace Corps, USAID, the National Science Foundation, the January OPM ER/LR Roundtable, the HHS Office of Women’s Health, and the IPMA 2016 International Training Conference.

I knew the Management Seminar Series would be a great opportunity to network, but I was surprised by the number of trans-NIH connections I made.
I have made friendships that will potentially last my entire career.

I am truly grateful to this program and highly recommend it to others!
In this transitional year, our people continuously demonstrated our One OHR commitment to you, our strategic partners, to achieve the proactive solutions that will define our progress in support of the NIH workforce.