

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

PART A Department or Agency Identifying Information	1. Agency	1. HHS Food and Drug Administration		
	1.a 2nd level reporting component			
	2. Address	2. 10903 New Hampshire Avenue		
	3. City, State, Zip Code	3. Silver Spring, MD 20993		
	4. Agency Code 5. FIPS code(s)	4. HE36	5. 112	

PART B Total Employment	1. Enter total number of permanent full-time and part-time employees	1. 15864
	2. Enter total number of temporary employees	2. 1007
	3. TOTAL EMPLOYMENT [add lines B 1 through 2]	4. 16871

PART C Agency Official(s) Responsible For Oversight of EEO Program(s)	Title Type	Name	Title
	Head of Agency	Dr. Janet Woodcock	FDA Commissioner
	Head of Agency Designee	Dr. Amy Abernethy	Principal Deputy Commissioner
	Principal EEO Director/Official	LaKeisha McClendon	Acting EEO Director
	Complaint Processing Program Manager	Garren Diggs	Complaints Processing Team Lead
	Diversity & Inclusion Officer	Bishop Buckley	Director of Diversity and Inclusion
	Women's Program Manager (SEPM)	Joyce Washington	Womens Program Manager
	Special Placement Program Coordinator (Individuals with Disabilities)	Anaury Angeles	Program Coordinator for Individuals with Disabilities
	Reasonable Accommodation Program Manager	Robert Thomas	Reasonable Accommodation Program Team Lead
	Anti-Harassment Program Manager	Shalisha Bazemore	Anti-Harassment Program Manager
Other EEO Staff	Sandra Hewitt	EEO Specialist (Formal)	
Other EEO Staff	Daniel Houston	EEO Specialist (Informal)	

For period covering October 1, 2019 to September 30, 2020

PART D List of Subordinate Components Covered in This Report	Subordinate Component and Location (City/State)	Country	Agency Code
EEOC FORMS and Documents	Required	Uploaded	
Reasonable Accommodation Procedure	Y	Y	
Agency Strategic Plan	Y	Y	
Organization Chart	Y	Y	
EEO Policy Statement	Y	Y	
Anti-Harassment Policy and Procedures	Y	Y	
Alternative Dispute Resolution Procedures	Y	Y	
Personal Assistance Services Procedures	Y	Y	
Disabled Veterans Affirmative Action Program (DVAAP) Report	N	N	
Diversity Policy Statement	N	N	
EEO Strategic Plan	N	N	
Federal Equal Opportunity Recruitment Program (FEORP) Report	N	N	
Human Capital Strategic Plan	N	N	
Results from most recent Federal Employee Viewpoint Survey or Annual Employee Survey	N	N	

EXECUTIVE SUMMARY: MISSION

FDA Mission

The Food and Drug Administration (FDA) is responsible for protecting the public health by ensuring the safety, efficacy, and security of human and veterinary drugs, biological products, and medical devices; and by ensuring the safety of our nation's food supply, cosmetics, and products that emit radiation.

FDA also has responsibility for regulating the manufacturing, marketing, and distribution of tobacco products to protect the public health and to reduce tobacco use by minors.

FDA is also responsible for advancing the public health by helping to speed innovations that make medical products more effective, safer, and more affordable and by helping the public get the accurate, science-based information they need to use medical products and foods to maintain and improve their health.

FDA also plays a significant role in the Nation's counterterrorism capability. FDA fulfills this responsibility by ensuring the security of the food supply and by fostering development of medical products to respond to deliberate and naturally emerging public health threats.

The FDA strives to attract, hire and retain a diverse, high-quality workforce where employees use their skills and abilities to accomplish the Agency's mission. And is committed to ensuring that our workforce environment is free from discrimination and dedicated to the principles of equity and diversity for all our employees.

FDA is an agency within the Department of Health and Human Services (HHS) and consists of nine Center-level organizations and thirteen Headquarter (HQ) Offices. The list below contains each Center-level organization, along with their mission, in alphabetical order:

- **Center for Biologics Evaluation and Research (CBER):** CBER is the Center within FDA that regulates biological products for human use under applicable federal laws, including the Public Health Service Act and the Federal Food, Drug and Cosmetic Act. CBER protects and advances the public health by ensuring that biological products are safe and effective and available to those who need them. CBER also provides the public with information to promote the safe and appropriate use of biological products.
- **Center for Drug Evaluation and Research (CDER):** CDER makes sure that safe and effective drugs are available to improve the health of people in the United States. CDER regulates over the counter and prescription drugs, including biological therapeutics and generic drugs.
- **Center for Devices and Radiological Health (CDRH):** CDRH assures that patients and providers have timely and continued access to safe, effective, and high-quality medical devices and safe radiation-emitting products. CDRH provides consumers, patients, their caregivers, and providers with understandable and accessible science-based information about the products the Center oversees, and facilitates medical device innovation by advancing regulatory science, providing industry with predictable, consistent, transparent, and efficient regulatory pathways, and assuring consumer confidence in devices marketed in the U.S.
- **Center for Food Safety and Applied Nutrition (CFSAN):** CFSAN, is one of six product-oriented centers, in addition to a nationwide field force, that provides services to consumers, domestic and foreign industry and other outside groups regarding field programs; agency administrative tasks; scientific analysis and support; and policy, planning and handling of critical issues related to food and cosmetics.
- **Center for Tobacco Products (CTP):** CTP oversees the implementation of the Family Smoking Prevention and Tobacco Control Act. Some of the Center's responsibilities include setting performance standards, reviewing premarket applications for new and modified risk tobacco products, requiring new warning labels, and establishing and enforcing advertising and promotion restrictions.

EXECUTIVE SUMMARY: MISSION

- **Center for Veterinary Medicine (CVM):**CVM's mission is to protect human and animal health. CVM
 - Makes sure an animal drug is safe and effective before approving it. The center approves animal drugs for companion (pet) animals, such as dogs, cats, and horses; and for food-producing animals, such as cattle, pigs, chickens, and honeybees. If the drug is for a food-producing animal, the center also makes sure that food products made from treated animals—meat, milk, eggs, and honey—are safe for people to eat before approving the drug;
 - Monitors the safety and effectiveness of animal drugs on the market;
 - Makes sure animal food—which includes animal feed, pet food, and pet treats—is safe, made under sanitary conditions, and properly labeled;
 - Makes sure a food additive used in animal food is safe and effective before approving it;
 - Conducts research that helps the center ensure the safety of animal drugs, animal food, and food products made from animals; and
 - Helps make animal drugs legally available for minor species, such as fish, hamsters, and parrots; and for minor (infrequent and limited) uses in a major species, such as cattle, turkeys, and dogs.
- **National Center for Toxicological Research (NCTR):** NCTR conducts scientific research to generate data for FDA decision making and develops and supports innovative tools and approaches that FDA uses to protect and promote individual and public health.
- **Office of Regulatory Affairs (ORA):**ORA protects consumers and enhances public health by maximizing compliance of FDA regulated products and minimizing risk associated with those products.
- **Office of Operations (OO):** OO ensures the timely and effective delivery of high quality and cost-effective mission support services across the FDA and its centers, and coordinates emergency preparedness and response activities for incidents involving FDA-regulated products across FDA and its stakeholders.

EEO Mission

The FDA's Office of Equal Employment Opportunity (OEEO) is responsible for implementing the agency's overall continuing affirmative employment program to promote equal employment opportunity and to identify and eliminate discriminatory practices and policies.

The mission of OEEO is to promote an inclusive work environment that ensures equal employment opportunity and fosters a professional culture that values diversity and empowers individuals so they can participate and contribute to their fullest potential. Our mission seeks to enhance the FDA's ability to perform its mission by:

- Promoting a culture of inclusiveness.
- Educating the workforce on the benefits of diversity, equity, inclusion, and accessibility.
- Assessing/eliminating barriers to fair treatment and equal employment.
- Ensuring equal access and reasonable accommodation.
- Providing a vehicle for allegations of discriminatory conduct.
- Facilitating the resolution of workplace grievances.
- Having a trained, fully competent, professional OEEO staff, able to provide training and consultative services to employees, supervisors, and managers.

EXECUTIVE SUMMARY: ESSENTIAL ELEMENT A-F

Essential Element A: Demonstrated Commitment from Agency Leadership

In FY20, the FDA appointed a new EEO Director to serve as the chief advisor to the Chief Operating Officer (COO) regarding FDA's responsibilities under Title VII of the Civil Rights Act and Section 501 of the Rehabilitation Act. Within that organizational structure, the EEO Director has an effective means of communication to the COO and senior management officials with a direct reporting line to the Commissioner on the status of EEO and Diversity, Equity, Inclusion, and Accessibility (DEIA) programs. Additionally, the EEO Director and EEO staff have regular meetings informing the Commissioner's senior management officials on the status of EEO and DEI programs, policies, and procedures.

As FDA builds a Model EEO, we are working to incorporate greater access and reporting clarity of strategic priorities to both the Commissioner and FDA's Executive Committee.

In FY20, the FDA had deficiencies in the following Essential Element A measures:

- The agency doesn't annually issue a signed and dated EEO policy statement on agency letterhead that clearly communicates the agency's commitment to EEO for all employees and applicants.
- The FDA doesn't provide recognition to employees, supervisors, managers, and units demonstrating superior accomplishment in equal employment opportunity.

Planned activities to address these deficiencies can be found in Part H of this report.

Essential Element B: Integration of EEO into Agency's Strategic Mission

In FY20, the OEEO engaged key enterprise-wide stakeholders and determined priorities to enhance its EEO functions. Some high-level actions included:

- Finalized a detailed Charter the first-ever FDA-wide Equal Employment Opportunity Government Council (EEOGC), which will be launched in FY21.
- Conducted an in-depth analysis of EEO Contacts and standard operating procedures (SOPs)
- Eliminated past practices and improved the line of communication between OEEO Staff and the new OEEO Director
- Re-established collaborations with HHS and OpDiv EEO Directors

In FY20, the FDA had deficiencies in the following Essential Element B measures:

- The agency head is not the immediate supervisor of the person ("EEO Director") who has day-to-day control over the EEO office.
- The EEO Director did not present to the head of the agency, and other senior management officials, the "State of the Agency" briefing covering the six essential elements of the model EEO program.
- The agency has not allocated sufficient funding and qualified staffing to
 - Enable the agency to conduct a thorough barrier analysis of its workforce.
 - Conduct thorough, accurate, and effective field audits of the EEO programs in components and the field offices.
 - Effectively administer its special emphasis programs (such as, Federal Women's Program, Hispanic Employment Program, and People with Disabilities Program Manager)
 - To ensure timely and complete compliance with EEOC orders.

Planned activities to address these deficiencies can be found in Part H of this report.

Essential Element C: Management and Program Accountability

In FY20, the OEEO conducted an evaluation of its DEIA functions, benchmarked best practices, and developed strategic recommendations to improve and refocus FDA's commitment to DEIA. Some high-level actions included:

EXECUTIVE SUMMARY: ESSENTIAL ELEMENT A-F

- Developed a statement of work for support services to develop a new EEO Strategic Plan, a new DEIA Strategic Plan, a new Outreach and Recruitment Strategic Plan and DEIA training solutions
- Hired two new EEO Specialists to strengthen OEEO customer service and mission success
- Developed new DEIA Curriculum/Approach
- Launched DEIA training agency-wide

OEEO recognizes that to achieve our FDA mission to protect public health and deliver our critical services with excellence, we must have a climate of mutual respect where employees can perform to their best potential. Currently, the FDA does not have a formal Anti-Harassment Program, which leaves the agency and its employees vulnerable to improper work conduct that, left unchecked or unaddressed, could rise to illegal workplace harassment.

To demonstrate FDA's commitment to maintaining a safe and civil organizational culture, free from harassment, in FY20 OEEO:

- Benchmarked Anti-Harassment Programs that have been vetted and approved by the EEOC
- Captured best practices from Anti-Harassment and Civility initiatives that have been launched internally at the FDA
- Rolled out web-based harassment and civility training offered at the HHS learning management system (LMS)

In FY20, the FDA had deficiencies in the following Essential Element C measures:

- The agency does not regularly assess its Centers for possible EEO program deficiencies.
- The agency does not regularly assess its Centers for possible EEO program deficiencies nor on their efforts to remove barriers from the workplace.
- The agency has not established a comprehensive Anti-Harassment policy and procedures that comply with EEOC's enforcement guidance.
- The agency does not process all accommodation requests within the time frame set forth in its reasonable accommodation procedures. The RAO timely processes them 90% of the time.
- The FDA does not post its procedures for processing requests for Personal Assistance Services on its public website. Currently, the PAS procedures are available in the FDA intranet.
- The EEO office did not have timely access to accurate and complete data required to prepare the MD-715 data tables.

Planned activities to address these deficiencies can be found in Part H of this report.

Essential Element D: Proactive Prevention of Unlawful Discrimination

The OEEO recognizes that to create a more diverse, equitable, and inclusive Agency, we must understand the root causes of workplace barriers and propose feasible strategies to eliminate them. In FY20, OEEO began mapping activities to be undertaken in FY21 to 1) determine barriers and their root causes through collaborations with the Office of Talent Solutions (OTS), Office of Human Capital Management (OHCM) and respective Offices and Centers; 2) outline potential actions to eliminate identified barriers and support solution implementation; and 3) determine efficacy of solution implementation by tracking barrier metrics.

OEEO also recognizes that to effectively conduct its barrier analysis functions, access to accurate and complete data is necessary. During FY20, FDA did not have access to accurate and complete workforce data due to issues with the HHS Business Intelligence Information System (BIIS). There is currently no ability to report on the race/ethnicity of new hires, and race/ethnicity snapshots of the FDA workforce are no longer accurate due to the significant number of new hires with no available race/ethnicity data. All HHS OpDivs currently face the same issue. The BIIS team is actively working on this issue and once complete, the ability to accurately report race/ethnicity data (in the context of all traditional data limitations) should be restored. Once available, FDA will need to perform a detailed analysis on the state of its ERI data to identify the extent of missing data and other data quality issues that might be present.

EXECUTIVE SUMMARY: ESSENTIAL ELEMENT A-F

In FY20, the OEE0 identified FDA's needs to cultivate and promote an equitable workplace. To successfully do this, the OEE0 took the following actions:

- Met with Executive Officers to determine training needs of their Centers
- Moved payroll surplus to operating costs to fund contract for training needs.
- Partnered with FDAU & FDA Learning and Development Community
- Benchmarked trainings offered at Government agencies

In FY20, the FDA had deficiencies in the following Essential Element D measures:

- The agency does not conduct exit interviews or surveys that include questions on how the agency could improve the recruitment, hiring, inclusion, retention, and advancement of individuals with disabilities.
- The agency did not regularly review and conduct a thorough barrier analysis

Planned activities to address these deficiencies can be found in Part H of this report.

Essential Element E: Efficiency

In FY20, the OEE0 budget and funding functions transitioned to the working capital fund (WCF). This operating model offered key benefits, including the improvement of our mission delivery due to detailed cost analysis and proactive customer engagement. To align OEE0 operations to the WCF to better cultivate and promote a diverse and inclusive workplace, the OEE0 took the following actions:

- OEE0 staff met with the cost allocation team to learn about the history of the WCF at FDA.
- Conducted a service-level-agreement (SLA) analysis to determine if they were appropriate and reasonable.
- Conducted a budget analysis to identify budget requests for FY21, FY22, and FY23 respectively.

The Alternative Dispute Resolution (ADR) and Reasonable Accommodation functions are critical to the EEO process. In FY20, the OEE0 leveraged its partnership with ADR and Reasonable Accommodations to maximize communication and efficiency for employees to access these alternative methods for resolving conflicts outside of the EEO informal counseling or formal complaint process. The OEE0 met with the Office of Conflict Prevention and Resolution (OCPR) to discuss best practices and engagement opportunities. OEE0 and OCPR agreed to a training partnership where RA and OCPR were incorporated in training engagement opportunities to ensure alignment and consistent messaging.

In FY20, the FDA had a deficiency in the following Essential Element E measure:

- When seeking legal sufficiency reviews, the EEO Office does not have access to sufficient legal resources separate from the agency representative.

Planned activities to address this deficiency can be found in Part H of this report.

Essential Element F: Responsiveness and Legal Compliance

The OEE0 Compliance Team continues to provide timely EEO counseling, timely complete investigations, and issued acceptance letters and dismissal decisions within 40-50 days after receipt of the written EEO counselor reports which is timelier than the 60-day EEOCs suggested timeframe.

In FY20, the FDA had a deficiency in the following Essential Element F measure:

- The FDA doesn't post its quarterly No FEAR Act data on its public webpage.

Planned activities to address this deficiency can be found in Part H of this report.

Note: There were 20 measures that received an N/A response, correlated with the abovementioned 18 deficiencies. Most of the N/A responses are due to the lack of an FDA-wide Anti-Harassment Program and Policy and the lack of a comprehensive Barrier Analysis process.

EXECUTIVE SUMMARY: WORKFORCE ANALYSES

FDA recognizes that continuous data analysis is key to identifying effective practices and areas of opportunity. Unfortunately, FDA was unable to conduct a thorough workforce analysis due to data integrity issues.

During FY20, HHS identified deficiencies specifically related to the integrity of HHS and OpDiv data and data systems. Before HHS and OpDiv's can provide data and analyze trends, HHS must implement changes to ensure the integrity of the data. During the next FY, HHS has stated they will improve their data systems, data collection methods, reporting mechanisms and use of the data with the goal of ensuring that HHS data is accurate and comprehensive to permit trend analysis for assessing compliance with MD-715 requirements. HHS and all its OpDivs will not assess whether barriers or triggers may exist until after FY22, when enough accurate data has been compiled to establish trends to make informed assessments.

Note: FDA would like to acknowledge our FY19 E.3 Executive Summary included misleading information about Veterans and disability status. The wording used in the report might have led readers to perceive that most or all veterans employed by the FDA have a significant psychiatric disorder. This was an unintentional error and subsequent FDA workforce analysis will not use this misleading language.

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

FDA recognizes that to be a Model EEO Agency, its Centers must also reflect their commitment and compliance with EEO and DEIA rules, regulations, executive orders, and laws.

We have compiled a non-exhaustive list of high-level EEO and DEIA accomplishments across the FDA Centers:

Diversity, Equity, and Inclusion Training and Employee Development Opportunities

CFSAN:

- Staff College submitted its annual accreditation self-audit to the accrediting body, the International Association for Continuing Education and Training (IACET). The submission marked a significant milestone recognizing our first full year as an accredited organization. The year was spent applying the higher standards to all work and included working with others in diversity and inclusion initiatives.
- Staff College researched sexual harassment videos and provided Federally Employed Women (FEW) with a video titled "How to Recognize, Address, and Prevent Workplace Harassment" to utilize in their meeting.
- Launched the Federal Internal Coach Training Program Satellite Pilot Foods Program cohort. The cohort is a cross center group of 14 individuals, including credentialed CVM and CFSAN coach trainers, support coaches from ORA and CFSAN, and coaches in training from all three centers with the goal of creating a cadre of professional coaches within the FDA Foods Programs to increase employee engagement, develop leaders at all levels, and create a coaching approach and culture across food safety initiatives and programs.
- Completed the virtual, four-part Developing and Implementing an Outward Mindset leadership training for OFAS senior leaders and branch chiefs for all supervisory personnel in the office have a philosophy and approach to improving relationships and program outcomes in support of the One OFAS Initiative. The OFAS Office Director plans to extend this training to his office of 120 individuals, using Staff College facilitators and producers to achieve the goal at a significantly reduced cost over the hiring of private consultants and facilitators.
- The CFSAN Career Development Mentoring Program provides CFSAN employees with a professional network to cultivate a positive employment experience at CFSAN through peer relationships. It is unique in that it integrates a sequence of Project-Based Learning (PBL) courses that builds and enhances mentee-mentee relationships. The program is based on the development of a 24-mentee cohort from different areas of CFSAN with tailored experiences over a one-year cycle and relies upon both traditional and peer mentorship. Current, three office directors are serving as mentors.

CDRH

- CDRH trains employees in 508 Compliance through a variety of mechanisms, including Medical Device Reviewer Training and New Employee Training.
- The CDRH New Managers Academy (NMA) is a structured cohort training development program for new managers. The goal of the academy is to provide new supervisors with exposure to information that will increase their knowledge of supervision within the Federal Government. The academy is designed to provide a comprehensive training program consisting of: supervisory competency-based training, Mentoring and Individual Development Plan (IDP) establishment, and introduction to the CDRH Guiding Principles. The academy takes place over seven weeks and a total of eight training days. The curriculum consists of courses and learning events addressing the CDRH and OPM Supervisory competencies and the CDRH Engage recommendations.

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

- The CDRH's Reviewer Certification Program (RCP), which began in September 2011, is intended for all new TPLC lead reviewers and medical officers in the Office of Product Evaluation and Quality (OPEQ) and for Office of Science and Engineering Laboratories (OSEL) scientists who spend 50% or more of their time doing consults for OPEQ. The program welcomes seasoned reviewers and other staff who work with new reviewers and wish to support the learning experience. The program provides education and learning to develop the baseline knowledge, skills, and abilities for TPLC lead reviewers in CDRH from all scientific and engineering disciplines. The program includes core coursework, which comprises 37.5 training hours, lasting approximately 60 days. The advanced coursework includes seven mandatory courses and one additional online course which can be completed within one year.

CVM

- CVM provides a variety of formal learning opportunities to educate the workforce (including hiring managers, on diversity, equity, and inclusion). This curriculum includes courses aimed at identifying what diversity is, and how to leverage diversity to create a more dynamic and inclusive workplace. Courses are open to everyone and include but are not limited to the following: Creating a Culture of Inclusion, Examining Individual and Cultural Bias, and Communicating Across Generations. In FY20, CVM implemented a comprehensive hiring manager training program to help avoid biases during the hiring and interview processes. CVM also provided Reasonable Accommodation training for all supervisors.

- In addition to formal training, diversity learning events are held throughout the year and include diversity discussions, monthly diversity and inclusion exercises, a comprehensive monthly Diversity and Inclusion newsletter, and more. CVM also has a comprehensive Diversity and Inclusion SharePoint site and Toolbox that employees can utilize to learn about various topics at their own pace. CVM established a Diversity Champion Program whereby employees have opportunities to explore various aspects of diversity and/or inclusion through education.

- In FY20, CVM began hosting "Kitchen Table Talks" with the intent of having open discussions around diversity issues, especially race. These weekly discussions have been well received by the Center and typically had 10%-15% of the Center attending on any given week. Employees of all demographics and levels of the Center participate.

- To better support CVM's employees with disabilities, CVM created a WebEx captioning resource guide. CVM also created new Section 508 tools and resources as part of our ongoing 508 training.

- Internally, CVM has a strong developmental program and continues to grow the internal pipeline by offering technical and soft-skill training, leadership and supervisor development courses, and other career development opportunities. As part of our focus on professional growth for all employees, the Center offers the CVM Core Curriculum, which teaches the critical leadership and relationship skills that are embedded in the cultural fabric of the Center. These classes include Crucial Conversations, which teaches how to deliver and receive feedback and build alignment in conversations; 7 Habits of Highly Effective People, which teaches principles of individual (e.g., time management) and interdependent effectiveness (e.g., thinking "win, win" and listening); Myers Briggs Type Indicator (MBTI), which makes attendees aware of their personality types and where potential conflicts could occur between those with different types; and Foundations of HPO, which introduces new employees to CVM's culture and what is expected of them as leaders at the Center.

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

- In FY20, CVM launched a new mentoring opportunity to further the career development of women; racial, ethnic, cultural, and religious minorities; LGBTQ individuals; and persons with disabilities. Just like with CVM's existing mentoring program, this new opportunity provides mentees benefits, such as: strengthening connections, relationships, and support at work; enhancing their professional skill set; and exploring their potential and goals.

- CVM has a robust mentoring program where all employees, regardless of their career stage, can participate as a mentor, a mentee, or both. All CVM employees are notified of the program and can participate based on their individual development needs after receiving supervisory approval. The mentoring program is a mixture of formal and informal, incorporating the best qualities of each into a cohesive program. Mentors are formally trained in their roles and mentors and mentees are provided with resources and support to help them through each stage of mentoring. The program is evaluated to assess its effectiveness and determine if any changes need to be made.

CTP

- CTP encourages Center leadership and staff to participate in CTP's Developing U training program, and "Finding the Best in You" Career Development Program, both of which offer workshops and internal trainings designed to enhance employee engagement, foster inclusion, and encourage career development conversations. In FY20, CTP offered the following Diversity and Inclusion specific trainings: Championing Diversity, Unconscious Bias, Leading Across Generations, and The Loudest Duck. CTP has also offered supervisory brown bag sessions on inclusion, reasonable accommodations, and equal opportunity employment. CTP publishes a Diversity and Inclusion column in the Center's quarterly newsletter, and frequently updates the CTP Diversity and Inclusion SharePoint site, which includes topical articles, Employee Resource Group (ERG) events and Work Life resources.

- The Developing U Program is CTP's Management Development Program. The management development certificate program is open to all managers/supervisors and employees who are at least a GS-13 or equivalent and has two tracks: current managers/supervisors; and aspiring leaders. CTP employees who meet the Developing U criteria (at least GS-13 or equivalent) can be enrolled at any time with Supervisor and Office Deputy Director's approval and all managers/supervisors are automatically enrolled in the program. Courses within the program are designed to meet the Office of Personnel Management (OPM) training requirements and CTP competencies for managers/supervisors and to develop aspiring leaders to become managers/supervisors. There are 256 participants enrolled. Mentoring program opportunities within CTP are listed on the CTP Intranet page, CTP Administrative Resources SharePoint page and CTP Learning Hub (Learning Management System).

- The CTP "Finding the Best in You" Career Development Program consists of a series of bimonthly workshops that are available for all CTP employees. Workshop topics include networking with colleagues, and initiating career conversations with supervisors, as well as, peer and leadership panel discussions, and speed mentoring. These workshops are designed to build career awareness, enhance career development skills, increase employee engagement, foster inclusion, and develop relationships across various levels of the Center.

- The following five workshops were held in FY20: Career Development Workshop, projecting a Professional Image, Developing Personal Initiative, Strategies for Self-Development, and Developing Work-Life Balance. After each workshop, an evaluation is sent to participants. CTP continues to evaluate the program offerings based on feedback and interest.

CBER

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

- CBER worked with the Office of Equal Employment Opportunity to offer the following Center-specific diversity and inclusion training: Diversity & Inclusion in the Workplace training which explored diversity and inclusion in the workplace on three levels: how we individually respond to issues of diversity and inclusion; how our interactions with others in the workplace and society reflect our values as individuals and a society regarding diversity and inclusion; and how we can all support diversity and inclusion in our workplaces at the organizational level. This course was designed for CBER Supervisors, Managers and Team Leads ONLY. A total of 20 CBER employees participated in this course.

- The CBER Leadership Program for Non-Supervisors was designed to expose participants to the basic competencies needed to become a successful leader. The program included both classroom instruction and a developmental leadership assignment. Although participation in this program does not guarantee career advancement, it does prepare participants for leadership roles. Participation is dependent upon supervisory approval and the program requires participants to attend training opportunities intended to develop individuals in a leadership role. A developmental assignment must also be presented for approval and successfully completed to complete the program. A total of 23 CBER employees participated in this training program.

- CBER leadership recognized that there is a distinct difference between a Medical Officer's training prior to CBER employment and the skills needed for their work in CBER. To address this gap, the Medical Officer Training Program was established. The training provides the scientific and regulatory knowledge for a Medical Officer to work at the full performance level with CBER. Every new participant in the program and their supervisor receives a copy of the Standard Operating Procedures and Policies (SOPP) 7305 which describes the policies and procedures for qualification to move from apprentice Medical Officer Reviewer to Reviewer. A total of 18 CBER Medical Officers participated in this course. During FY 2020, 13 of CBER Medical Officers completed this program.

- The CBER Mentoring Program allows individuals to be paired with leaders throughout CBER who provide guidance and situational leadership to employees in developmental and traditional roles within CBER. Each pairing lasts for a period of approximately 12 months. There was a total of five mentees and five mentors matched that participated in this mentoring program.

- Federal Executive Institute's Leadership for a Democratic Society is managed through FDA University. CBER will provide candidates for the Office of Personnel Management's (OPM) Federal Executive Institute (FEI) for the Leadership for a Democratic Society (LDS) Program for Fiscal Year (FY) 2021. The FEI LDS Program is an executive leadership development opportunity that challenges candidates to embrace a broader perspective of their government and the unique roles they serve. This four-week program is designed to build knowledge and skills in leadership, transforming public organizations, the policy framework in which Government leadership occurs, and the broad global context on international trends and events that shape Government agendas. The Senior Leaders are identified through a nomination process for the center. There was a total of two nominees in this program.

- CBER Office Buddy is a component of our CBER Onboarding Program. An office buddy is a CBER employee that is identified by supervisors as a superior performer with strong people skills to partner with a new employee during the first 90 days of employment to offer advice and guidance that help foster and promote the skill and professional development of a new employee. The Buddy should be a current office employee who will provide valuable support and insight into CBER's work culture and environment and provide the new employee with a point of contact for general queries regarding day-to-day operational issues. The Buddy helps integrate the new employee into CBER by familiarizing the new employee with CBER's culture, attitude, and expectations. The Buddy should actively assist the new employee for at least the first three months. A total of 28 CBER Office buddies were paired with CBER new hires.

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

ORA

- ORA has two (2) mentoring programs: FDA Alumni Advisor Program (FDAAAP) and the Open Learning Network (OLN). The FDAAAP is a formal mentoring program with rehired annuitants serving as mentors. It currently has seven (7) participants and five (5) mentors. The OLN is a web-based, mentoring platform that enables ORA employees to connect with each other as a mentor or mentee. The OLN currently has 99 participants.
- ORA has other career development programs: Management and Leadership Development Program (MLDP), Potential Supervisors Program (PSP), Leadership Excellence Advancement Program (LEAP) and Resilient Leadership (RL) Program.
 - The MLDP is a collection of ORA programs, internal and external courses, leadership competencies, resources, and recommended curriculums for first-line supervisors, mid-level managers, and SES leaders.
 - The PSP is comprised of formally selected employees who have met eligibility requirements. In addition to competency building, it has a formal mentoring component. It currently has 38 cohorts, each with a mentor.
 - The LEAP is comprised of formally selected employees who have met eligibility requirements. In addition to competency building, it has a formal mentoring component. LEAP currently has 20 cohorts each with a mentor.
 - The RL Program consists of ORA supervisors and managers and it does not have formal selection process, but includes formal coaching. The RL Program currently has 36 participants and 10 coaches.

CDER

- The Women of CDER (WOC) Networking Group provided virtual programs for its members during the year. These programs include advocacy and support, career development and education, communication-publicity & technology, life enhancement and membership & outreach. Virtual offerings have included Yoga classes, book clubs, career development panel presentations and more.
- The CDER Military Alliance Networking Group (MAG) is the newest of the Center's employee resource groups. MAG currently engages with its membership to ensure that members are aware of issues affecting health care, military buy-back and recruitment and outreach opportunities. During 2020, the MAG joined the Recruitment & Outreach Team in virtual recruitment events to speak about work-life at the Center.
- CDER developed a civility code to set the expectation around how employees should treat each other in the performance of carrying out FDA CDER's Mission: Consider, Approachable, Respectful, and Empathetic. This code strengthens the workplace culture and value of inclusion and belonging for all employees.
- The annual Diversity and Inclusion Day was transition to a virtual format in 2020. The Committee presented a series of presentations, trainings, and discussions to provide awareness and education on topics like: Unconscious Bias, Bullying, A Current American Indian Perspective, Navigating the Imposter Syndrome and Creating Safe Zones for our LGBTQ+ Community. A total of 1,208 participants attended one or more trainings during the 5-week period.

Leadership Commitment to Diversity, Equity, and Inclusion

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

CFSAN

- CFSAN has responded to continuing events in our country by standing up a Diversity, Equity, and Inclusion Council charged with analyzing the current state in CFSAN and recommending areas where we can do a better job supporting and empowering all our employees. Staff College supported this effort by designing, supporting, and facilitating the DEI Council's kickoff meeting. They created an agenda for the three-day conference, planned activities, created a welcoming meeting space, designed a process for electing Council officials, took notes of the proceedings, provided technical support, and provided a SharePoint page where the Council can collaborate.

CDRH

- To build infrastructure and capacity within the Center to support our Diversity, Inclusion and Belonging Programs, CDRH established its first employee-driven Inclusion Council with representation from each Office across the Center. The inaugural Inclusion Council is comprised of eight (8) representatives from five ethnic backgrounds. The Inclusion Council aims to inform and drive thinking around strategic activities and planning for the CDRH Diversity, Inclusion and Belonging Program. The CDRH Inclusion Council participated in a "Jump Start" Training Program to promote trust, accountability, and advocacy, gain a greater understanding of diversity and inclusion and their impact on our business objectives. CDRH also hired a Personnel Psychologist and an Employee Engagement Program Manager to serve as in-house support applying psychology principles and employee engagement principles to develop and implement tailored programs to meet employee and organizational needs. Additionally, the development of this infrastructure bridges the connection between employee engagement and diversity, inclusion and belonging program activities.

CVM

- In FY20, CVM stood up the CVM Council of Thought Leaders and created a DEI Advocate position. Both the Council and the Advocate will serve as advisors to leadership and make recommendations on strategies to enhance and promote diversity, equity, and inclusion activities/programs. The Council and Advocate will also map out strategies to increase the diversity of CVM's workforce and retain our diverse employees.

CTP

- CTP participates in the FDA Diversity and Inclusion Steering Committee (DISC), the Diversity and Inclusion Advisory Committee (DIAC) and FDA's Advisory Committee for Employees with Disabilities (ACED).

NCTR

- Following the tragic death of George Floyd, NCTR's DEI Committee launched a monthly diversity, equity, and inclusion-themed virtual roundtable discussions on multiple topics including systemic racism and unconscious bias. These discussions were well attended, and participants engaged in crucial and constructive conversations that facilitated education, cultural awareness, and open and honest conversations about race and social injustice in our society.

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

- NCTR's reenergized Diversity and Inclusion Committee sponsored several diversity events and commemorative programs designed to support and cultivate an inclusive culture. In partnership with Blacks in Government, our Diversity & Inclusion Committee hosted its annual MLK Luncheon honoring the legacy of Dr. Martin Luther King Jr. NCTR also held a virtual "Lead with Pride" campaign in recognition of NCTR's growing LGBTQ+ community, and during Hispanic heritage month, launched "Faces of NCTR," a virtual newsletter highlighting Hispanic-American scientists and administrative professionals at the Center.

CDER

- CDER's strategic objective for 2020 centered on staff strategic alignment and awareness. Thus, strengthening the understanding and value of diversity to make the best scientific and regulatory decision was a primary focus of the Executive Committee this past year. This elevation of focus has a direct impact on CDER's short- and long-term ability to attract and retain a diverse workforce which will be critical based on the increase in employee retirement eligibility.

- The CDER Diversity & Inclusion Committee released four "I Am CDER" videos, which addresses diversity, inclusion, and civility topics. The videos discuss the commitment to an inclusive and diverse workforce and provides the business case by the Center Director and other Executive leaders. CDER's workforce provided personal "I Am" statements highlighting employee differences including members of the CDER Network Groups.

- At the start of the new year, the DE&I Committee began to routinely provide information about the Center's commitment to diversity and creating an inclusive culture. As part of the process, an email is sent to all CDER NEO attendees to reinforce information provided.

Outreach and Recruitment Efforts

CFSAN

- The CFSAN Recruitment Liaison and Workforce Policy and Program branches continued to support recruitment and outreach efforts via recruitment pages for all candidates interested in job opportunities at CFSAN including Pathways and Student Volunteers. We continued to utilize the CFSAN Career and Profile pages to provide hiring managers information about candidates interested in opportunities at CFSAN and focused on updating Handshake with employment opportunities to continue building STEM relationships with a broader audience of nationwide of colleges and universities. These efforts led to strengthening CFSAN's relationships with local colleges and universities by offering two How to Apply for Federal Job Workshops at Bowie State and the University of MD School of Pharmacy. CFSAN also strengthened our relationship with the Department of Defense by participating in the Ft. Meade/MWR Spouse Job Fair to build collaborative effort with the military community. CFSAN continued conducting monthly and periodic meetings with Center hiring managers to discuss current workforce levels and review the Workforce at a Glance quarterly reports to assist with hiring planning efforts.

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

- CFSAN is in the process of reviewing ways to improve current processes involved with sharing vacancy announcements with special interest, affinity, and employee resource groups (ERGs), colleges and universities with strong populations of under-represented groups and minority professional groups. To ensure we meet this goal, CFSAN will continue to attend career fairs, networking, and recruitment events at colleges, universities, and organizations that attract under-represented groups. The center will particularly focus on schools such as: Historically Black Colleges and Universities (HBCU); Hispanic Serving Institutions (HSI); Tribal Colleges and Universities (TCU); American Indian Alaska Native Serving Institutions (AIANSI); Asian American and Native American Pacific Islanders Serving Institutions (AANAPISI). Additionally, there will be a focus on participating in new networking and recruitment events, such as the Veterans Virtual Hiring Network. CFSAN plans on involving hiring managers and supervisors in decisions regarding outreach and recruitment approaches to target a diverse candidate pool and plans to host an event reaching under-represented groups to improve outreach and networking, continue partnering with the Agency/ Scientific Staffing Team to attract and build a candidate pool of diverse talent by partnering with colleges/universities; minority-focused professional organizations; veteran organizations; science, technology, engineering, math, and medicine (STEMM) groups; and other organizations. Also, we will work with FDA to understand current programs to support Schedule A employees and establish or expand resources and develop a diversity and inclusion brochure to use at recruitment events and effectively utilize social media to promote internships and employment opportunities among diverse populations.

CDRH

- As a result of a recent reorganization, the CDRH consolidated the recruitment and staffing functions within the Office of Management. Having a centralized Strategic Recruitment Team (SRT) has facilitated collaboration with hiring managers, standardized policies and practices, and allowed for the implementation of a strategic approach to hiring a more diverse workforce. The SRT utilizes many recruitment strategies and provides the education and resources needed to our hiring managers so that they understand and utilize all hiring authorities, including non-competitive hiring authorities such as People with Disabilities Hiring Authority, 30% Disabled Veterans Appointing Authority, Veterans Recruitment Appointment Authority, Pathways Programs, Returning Peace Corp Volunteer and Employees, Title 42(g) Staff Fellowship Program, and Commissioned Corps, ensuring a steady stream of qualified applicants from diverse backgrounds.

- When a vacancy is identified within the Center, the recruitment advisor holds a strategic recruitment meeting with the hiring manager and provides options for filling the position. These options include the use of the FDA Schedule A resume repository to identify potential candidates to fill specific positions within the organization. CDRH also utilizes USA Jobs to post announcements that are open to Schedule A candidates and veterans. These candidates receive the same consideration as employees internal to the government and are identified on a separate certificate for consideration by the hiring manager.

- The CDRH also has an extensive marketing and outreach program that cultivates and strengthens partnerships with stakeholders at academic institutions, diversity placement organizations, other government entities, and professional organizations to generate a competitive diverse talent pool. Print media (associations, professional, and scientific journals), social media, bulletins, professional association message boards, the internet, and other searchable virtual databases are utilized to advertise positions within the Center. Additionally, the CDRH incorporates diversity and inclusion messaging, themes and materials in our branding, marketing, outreach, and recruitment efforts to highlight the diversity inclusion efforts within the Center. This program seeks to enhance the Center's talent pipeline by engaging diverse, top level candidates at all stages of their careers.

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

- To complement our marketing and outreach program, the CDRH Library was created as a repository to store the resumes and credentials of the candidates we reach, including minority, veteran, and disabled groups and repository is leveraged to notify Center hiring managers of qualified candidates for their vacancies.

- In FY20, CDRH designed a new web-based career and professional development program (CDRH Careers) to support internal advancement for all employees as well as the internal advancement of employees with disabilities and those representing diverse target populations. The CDRH Careers Program provides a career overview model of the 35 major functional roles within the Center. The Program also outlines the connections between the various roles, provides competencies and capabilities for the functional roles, provides an opportunity for skills assessment, and provides developmental resources to support navigation between roles.

CVM

- In FY20, CVM attended a variety of career fairs, networking events, and recruitment events to attract a more diverse workforce. CVM mainly attended events hosted by and focusing on Historically Black Colleges and Universities (HBCUs), Asian American Native American Pacific Islander Serving Institutions (AANAPISI), and Veterans. CVM continues to share vacancy announcements with targeted professional associations and minority serving institutions while continuously looking for ways to expand our reach.

- CVM continues to use the employment hashtag - #CVMCareers with all job-related Twitter communications. To increase outreach to the Hispanic workforce, CVM added the Spanish translation of the phrase (#CVMCarreras) to all tweets. Additionally, CVM promotes employee testimonials and career fair events via Twitter using applicable hashtags such as #diversity, #culture, #inclusivity, #veterans, etc.

- CVM continued to involve hiring managers and supervisors in decisions regarding outreach and recruitment approaches to target a diverse candidate pool. CVM ensures that selecting officials are present during strategic recruitment meetings with HCMS staff and utilizes these meetings to remind hiring managers of how to attract diverse applicants for their vacancies. Additionally, CVM created a training session for new CVM hiring managers on the Center's Strategic Recruitment Management Process. The session provided an overview of the federal hiring process at CVM, and provided information on non-competitive appointments/special hiring authorities to include Schedule A, Peace Corps, veterans' authorities, etc. In FY20, CVM hired 3 employees under Schedule A and 1 employee under VEOA (Veterans Employment Opportunities Act of 1998). CVM hosted 5 interns through the Hispanic Association of College and Universities (HACU) program. Across all hires, over 8% were People with Disabilities, 62% female, and 7% veterans

CTP

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

- CTP uses numerous avenues to advertise and recruit for our positions, and all applicable hiring authorities. CTP attended numerous conferences and career fairs and networked with several hundred diverse candidates with disciplines in Science, Technology, Engineering and Mathematics (STEM). CTP increased targeted outreach to over 60 minority serving institutions, 30 scientific societies and conferences, and over 700 academic outlets and universities, including the Workforce Recruitment Program (WRP). CTP has also started advertising positions on the Washington DC Metro buses and platforms, Pandora, and through mobile ads. We also have a significant presence on LinkedIn and actively work to recruit on this platform. CTP continues to utilize the Career Profile system, a cloud-based resume bank program to which candidates can voluntarily upload their resume for the CTP Corporate Recruitment team to circulate among hiring managers. The program is available to the public at the CTP Jobs website, www.fda.gov/ctpjobs. CTP also offers resume coaching to aid potential applicants who may not have experience applying for government positions and could use assistance in federalizing their resume.

- To promote hiring staff with disabilities and increase our employee Schedule A population, the Corporate Recruitment Team and Strategic Recruitment Team partner together to provide education and resources to hiring managers on the Schedule A authority. The Corporate Recruitment Team provides a streamlined approach and proactively provides Schedule A resumes to hiring managers for targeted positions. Hiring managers can review resumes for candidates of interest and contact them directly for an interview after the Office of Talent Solutions (OTS) has determined their eligibility. Selections are reported back to the Corporate Recruitment and Strategic Recruitment teams. The Corporate Recruitment team has identified several national and local conferences to help build awareness of job opportunities at CTP and collect resumes from Schedule A job seekers to share with hiring managers. As a result of these efforts, CTP is proud to report the hiring of 22 Schedule A individuals in FY20.

NCTR

- NCTR analyzed and presented our workforce profile data to senior leadership; highlighting areas of concern and activities currently underway to address underrepresentation and diversity within NCTR's workforce. As a result of this increased awareness, 21 of NCTR's 27 new hires in FY20, belong to an ethnic or gender minority group. In addition, NCTR's Human Capital Director facilitated a senior leadership working session on how Individual Development Plans can help employees identify their training needs and achieve their career development goals.

- NCTR revised the content on our recruitment and outreach materials to communicate the Center's inclusive work environment more effectively in order to attract more diverse talent. We also created a more inclusive onboarding experience for new employees through new employee meet & greet sessions with senior leadership.

- We strengthened NCTR's outreach to historically black colleges and universities (HBCUs) through the establishment of a strategic partnership with Florida A&M University's HBCU College of Pharmacy and Pharmaceutical Sciences. This collaboration initiative provided an opportunity to share research opportunities for students and recent graduates with FAMU faculty members and deans. NCTR also participated in the virtual National HBCU Week and Conference, the nation's premiere gathering of students, stakeholders, supporters, and stewards of America's HBCUs, where over 1800 participants from over 100 HBCUs were represented.

- NCTR continued efforts to build a diverse workforce through established partnerships with LRAFB and Arkansas' veteran community with participation in a career fair held virtually on Facebook Live where we shared valuable information with veterans on the benefits of federal employment, and marketed NCTR as an employer of choice within the State.

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

CBER

- CBER regularly advertised in multiple scientific and peer reviewed journals and posted job vacancies on diversity employment sites, including - American Academy of Family Physicians, American Academy of Pediatrics, American Association of Immunologists, American College of Physicians, American College of Sports Medicine, American Military Medicine Journal, American Society for Clinical Oncology, American Society for Microbiology, American Society if Pediatric Hematology/Oncology, American Society of Gene and Cell Therapy, American Society of Hematology, American Society of Virology, Blood Journal, Journal of American Medical Association, LinkedIn, National Institute of Health Intramural Training and Education, New England Journal of Medicine, ResearchGate.net, Society for Immunotherapy of Cancer, Nature.com and Science.com.
- CBER conducted outreach at three career fairs targeted towards the recruitment of minority, veteran, disabled, and science, technology, engineering, and math STEM eligible candidates. CBER was an active member of the Office of Medical Products and Tobacco (OMPT) Scientific Recruitment Team, attending biweekly meetings and maintaining Center presence at OMPT-sponsored events.
- CBER continued to encourage use of the CBER Recruitment SharePoint site, providing managers and hiring officials with 24/7 access to candidate resume. The Recruitment SharePoint site contains a repository of current resumes from myriad recruitment sourcing and is accessible to CBER managers.

ORA

- During FY20, ORA participated in recruiting activities targeting Military Veterans and their spouses (three (3) events); students and alumni of Historically Black Colleges and Universities (seven (7) events); Latinx (one (1) event) and one general Diversity Career Fair. In FY20, ORA hired 10 Schedule A candidates and 88 Veterans.

CDER

- The R&O Team used social media platforms such as Handshake, Career Eco, vFair, Zoom, and WebEx to recruit, outreach, and engage potential candidates. The team also piloted a new model of meeting applicants by hosting virtual "Open House" events. For example, an Open House was held specifically for PharmD credentialed candidates. The event was attended by over 100 interested participants. During this "open house" a few of CDER program offices presented information about the mission of their office with a focus on the types of positions they hire requiring a PharmD.
- CDER's Recruitment and Outreach (R&O) Team quickly created and executed a framework for hosting remote monthly employment webinars. The employment webinars provide information on career opportunities within CDER. During this past year, the R&O Team presented these webinars to over 4,000 participants including college students, military veterans and spouses, current federal employees.
- The monthly employment webinars consist of a "spotlight" section whereby super-offices are given an opportunity to discuss their regulatory responsibilities mission and the work that they do to protect the public health. The forum also provides the Center to feature positions and provide an overview of the type of work performed, qualifications and education requirements necessary to be a candidate for the positions.

EXECUTIVE SUMMARY: ACCOMPLISHMENTS

• One important accomplishment of the year was the addition of strategic relationships with colleges and universities, professional associations and organizations and government-wide workgroups to support and enhance communication with targeted groups of applicants. A few of these partnerships include:

Hampton University School of Pharmacy

University of Puerto Rico

University of Texas at El Paso

Howard University School of Pharmacy

Notre Dame University of Maryland School of Pharmacy

EXECUTIVE SUMMARY: PLANNED ACTIVITIES

As we strive to achieve a Model EEO Program, the FDA is committed to identifying and removing any barriers that impede equal opportunity in our recruitment, hiring, promotion, retention, and professional development and training.

Below are several FY21-22 planned activities that will address deficiencies that were identified during this reporting period in Part G and Part J, along with other planned activities that will aid in the advancement of EEO, diversity, equity, inclusion, and accessibility.

- The OEEEO will perform an in-depth assessment and evaluation ("Gap Analysis") of the FDA EEO Program to identify gaps in our compliance with federal EEO regulations and to determine areas of improvement.
- The OEEEO will create and lead the Diversity, Equity, and Inclusion Workgroup, tasked with making data-informed decisions and solutions to increase FDA's diversity and promote equity and inclusion.
- The OEEEO, in collaboration with key stakeholders, will conduct an Inclusion Survey that will measure the extent to which the FDA's systems, leaders, and colleagues foster a welcoming and fair environment for all employees to be themselves, find connection, and meaningfully contribute to the FDA mission.
- The OEEEO, in collaboration with key stakeholders, will leverage contract support to conduct focus groups with diverse groups across the FDA to understand employee experience with DEI and brainstorm ways to strengthen the program.
- The OEEEO, in collaboration with key stakeholders, will develop a new DEI Strategic Plan, which will be informed by Center engagement, the Inclusion Survey, Focus Groups, and other sources of insights.
- The OEEEO will draft an updated EEO Policy Statement that is timely and compliant with EEOC Guidance, for review, approval, and dissemination by the FDA Commissioner.
- FDA will create a structure to award employees, supervisors, managers, and units on EEO activities.
- EEO Director will present to the head of the agency, and other senior management officials, the "State of the Agency" briefing covering the six essential elements of the model EEO program and the status of the barrier analysis process.
- The OEEEO will hire qualified staff to successfully implement the EEO Program functions and leverage experienced contract support to mitigate gaps and continue meeting OEEEO's numerous obligations.
- The OEEEO will re-establish the MD-715 Report Workgroup with key Center representatives. The workgroup will enable the OEEEO to effectively engage with all the Centers and assess their efforts towards determining and addressing EEO deficiencies.
- The OEEEO will develop a barrier analysis strategy and streamlined process for the FDA to determine triggers and find possible barriers, including the review of policies, procedures and practices by race, national origin, sex and disability.
- The OEEEO will launch the EEO General Council with key Center representatives to ensure a direct communication channel with Center leadership. The Council representatives will be key stakeholders in all decisions related to EEO deficiencies and barrier analysis.
- The Reasonable Accommodations Office (RAO) will coordinate internally to develop and publish PAS Procedures on FDA public website
- The FDA RAO timely processes reasonable accommodation requests 90% of the time. RAO will continue to offer excellent service to FDA employees and timely process all RA requests.
- The OEEEO will meet with the Office of Talent Solutions (OTS) to determine the best path forward include measures to improve the employment lifecycle of individuals with disabilities.
- The OEEEO will seek sufficient legal resources in OEEEO to provide legal sufficiency reviews, and to help the office develop and maintain legally compliant programming.
- The OEEEO Compliance staff will update FDA's current No FEAR Act public website with data from missing years (FY19, FY20, FY21) and will develop a process to timely post No FEAR Act data on a quarterly basis.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

**CERTIFICATION of ESTABLISHMENT of CONTINUING
EQUAL EMPLOYMENT OPPORTUNITY PROGRAMS**

[Redacted] am the
(Insert Name Above) (Insert official title/series/grade above)

Principal EEO Director/Official for

[Redacted]
(Insert Agency/Component Name above)

The agency has conducted an annual self-assessment of Section 717 and Section 501 programs against the essential elements as prescribed by EEO MD-715. If an essential element was not fully compliant with the standards of EEO MD-715, a further evaluation was conducted and, as appropriate, EEO Plans for Attaining the Essential Elements of a Model EEO Program, are included with this Federal Agency Annual EEO Program Status Report.

The agency has also analyzed its work force profiles and conducted barrier analyses aimed at detecting whether any management or personnel policy, procedure or practice is operating to disadvantage any group based on race, national origin, gender or disability. EEO Plans to Eliminate Identified Barriers, as appropriate, are included with this Federal Agency Annual EEO Program Status Report.

I certify that proper documentation of this assessment is in place and is being maintained for EEOC review upon request.

Signature of Principal EEO Director/Official
Certifies that this Federal Agency Annual EEO Program Status Report is in compliance with EEO MD-715.

Date

Signature of Agency Head or Agency Head Designee



Date

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist



Essential Element: A Demonstrated Commitment From agency Leadership

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	A.1. The agency issues an effective, up-to-date EEO policy statement.				
	A.1.a. Does the agency annually issue a signed and dated EEO policy statement on agency letterhead that clearly communicates the agency's commitment to EEO for all employees and applicants? If "Yes", please provide the annual issuance date in the comments column. [see MD-715, II(A)]		X		
	A.1.b. Does the EEO policy statement address all protected bases (age, color, disability, sex (including pregnancy, sexual orientation and gender identity), genetic information, national origin, race, religion, and reprisal) contained in the laws EEOC enforces? [see 29 CFR § 1614.101(a)] If the EEO policy statement covers any additional bases (e.g., marital status, veteran status and political affiliation), please list them in the comments column.			X	The FDA did not issue an EEO Policy Statement in FY20, thus we didn't comply with this measure.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	A.2. The agency has communicated EEO policies and procedures to all employees.				
A.2.a. Does the agency disseminate the following policies and procedures to all employees:					
A.2.a.1. Anti-harassment policy? [see MD 715, 11(A)]					
				X	The FDA did not issue an Anti-Harassment Policy in FY20, thus we didn't have a process in place to comply with this measure. See Part H on measure C.2.a for planned activities to address this deficiency.
A.2.a.2. Reasonable accommodation procedures? [see 29 CFR § 1614.203(d)(3)]					
		X			
A.2.b. Does the agency prominently post the following information throughout the workplace and on its public website:					
A.2.b.1. The business contact information for its EEO Counselors, EEO Officers, Special Emphasis Program Managers, and EEO Director? [see 29 C.F.R § 1614.102(b)(7)]					
		X			
A.2.b.2. Written materials concerning the EEO program, laws, policy statements, and the operation of the EEO complaint process? [see 29 CFR §1614.102(b)(5)]					
		X			
A.2.b.3. Reasonable accommodation procedures? [see 29 CFR § 1614.203(d)(3)(i)] If so, please provide the internet address in the comments column.					
		X			http://inside.fda.gov:9003/EmployeeResource/EqualEmployment/ReasonableAccom/default.htm ; https://www.fda.gov/media/108226/download
A.2.c. Does the agency inform its employees about the following topics:					
A.2.c.1. EEO complaint process? [see 29 CFR §§ 1614.102(a)(12) and 1614.102(b)(5)] If "yes", please provide how often and the means by which such training is delivered.					
		X			The FDA informs employees about the EEO complaint process via new employee orientation and Center-specific training.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist



A.2.c.2. ADR process? [see MD-110, Ch. 3(II)(C)] If “yes”, please provide how often.	X		The FDA informs employees about the ADR process via new employee orientation and Center-specific training.	
A.2.c.3. Reasonable accommodation program? [see 29 CFR § 1614.203(d)(7)(ii)(C)] If “yes”, please provide how often.	X		The FDA informs employees about the RA program via new employee orientation and Center-specific training.	
A.2.c.4. Anti-harassment program? [see EEOC Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (1999), § V.C.1] If “yes”, please provide how often.			X The FDA did not have an Anti-Harassment Program and Policy in FY20, thus we could not comply with this measure. See Part H on measure C. 2.a for planned activities to address this deficiency.	
A.2.c.5. Behaviors that are inappropriate in the workplace and could result in disciplinary action? [5 CFR §2635.101(b)] If “yes”, please provide how often.	X		The FDA informs employees about the behaviors that are inappropriate in the workplace via new employee orientation as well as FDA-wide and Center-specific training.	
 Compliance Indicator			Measure Has Been Met	For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
 Measures	A.3. The agency assesses and ensures EEO principles are part of its culture.		Yes No N/A	
A.3.a. Does the agency provide recognition to employees, supervisors, managers and units demonstrating superior accomplishment in equal employment opportunity? [see 29 CFR § 1614.102(a)(9)] If “yes”, provide one or two examples in the comments section. .		X		
A.3.b. Does the agency utilize the Federal Employee Viewpoint Survey or other climate assessment tools to monitor the perception of EEO principles within the workforce? [see 5 CFR Part 250]	X		FDA regularly monitor all of the FEVS site, including those that pertain to the perception of EEO principles.	

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist



Essential Element: B Integration of EEO into the agency's Strategic Mission

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	B.1. The reporting structure for the EEO program provides the principal EEO official with appropriate authority and resources to effectively carry out a successful EEO program.				
	B.1.a. Is the agency head the immediate supervisor of the person ("EEO Director") who has day-to-day control over the EEO office? [see 29 CFR §1614.102(b)(4)]		X		HHS will develop a global approach to align all the EEO Directors within HHS with their respective Agency heads. See the HHS MD-717 Part H.26
	B.1.a.1. If the EEO Director does not report to the agency head, does the EEO Director report to the same agency head designee as the mission-related programmatic offices? If "yes," please provide the title of the agency head designee in the comments.	X			Jim Sigg, Chief Operating Officer
	B.1.a.2. Does the agency's organizational chart clearly define the reporting structure for the EEO office? [see 29 CFR §1614.102(b)(4)]	X			
	B.1.b. Does the EEO Director have a regular and effective means of advising the agency head and other senior management officials of the effectiveness, efficiency and legal compliance of the agency's EEO program? [see 29 CFR §1614.102(c)(1); MD-715 Instructions, Sec. I]	X			
	B.1.c. During this reporting period, did the EEO Director present to the head of the agency, and other senior management officials, the "State of the agency" briefing covering the six essential elements of the model EEO program and the status of the barrier analysis process? [see MD-715 Instructions, Sec. I] If "yes", please provide the date of the briefing in the comments column.		X		
	B.1.d. Does the EEO Director regularly participate in senior-level staff meetings concerning personnel, budget, technology, and other workforce issues? [see MD-715, II(B)]	X			

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	B.2. The EEO Director controls all aspects of the EEO program.				
	B.2.a. Is the EEO Director responsible for the implementation of a continuing affirmative employment program to promote EEO and to identify and eliminate discriminatory policies, procedures, and practices? [see MD-110, Ch. 1(III)(A); 29 CFR §1614.102(c)] If not, identify the office with this authority in the comments column.	X			
	B.2.b. Is the EEO Director responsible for overseeing the completion of EEO counseling? [see 29 CFR §1614.102(c)(4)]	X			
	B.2.c. Is the EEO Director responsible for overseeing the fair and thorough investigation of EEO complaints? [see 29 CFR §1614.102(c)(5)] [This question may not be applicable for certain subordinate level components.]	X			
	B.2.d. Is the EEO Director responsible for overseeing the timely issuance of final agency decisions? [see 29 CFR §1614.102(c)(5)] [This question may not be applicable for certain subordinate level components.]			X	This is the responsibility of HHS EEO.
	B.2.e. Is the EEO Director responsible for ensuring compliance with EEOC orders? [see 29 CFR §§ 1614.102(e); 1614.502]	X			
	B.2.f. Is the EEO Director responsible for periodically evaluating the entire EEO program and providing recommendations for improvement to the agency head? [see 29 CFR §1614.102(c)(2)]	X			
	B.2.g. If the agency has subordinate level components, does the EEO Director provide effective guidance and coordination for the components? [see 29 CFR §§ 1614.102(c)(2); (c)(3)]	X			The EEO Director coordinates with Center and OpDiv Executives.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	B.3. The EEO Director and other EEO professional staff are involved in, and consulted on, management/personnel actions.				
	B.3.a. Do EEO program officials participate in agency meetings regarding workforce changes that might impact EEO issues, including strategic planning, recruitment strategies, vacancy projections, succession planning, and selections for training/career development opportunities? [see MD-715, II(B)]	X			
	B.3.b. Does the agency's current strategic plan reference EEO / diversity and inclusion principles? [see MD-715, II(B)] If "yes", please identify the EEO principles in the strategic plan in the comments column.	X			There is a current FDA Diversity and Inclusion Strategic Plan 2018-2021 developed by the D&I Steering Council and Diversity and Inclusion Advisory Council which is specifically devoted to promoting the principles of Diversity and Inclusion. FDA's three goals are to: (1) Ensure Leadership Commitment, (2) Cultivate and Support Inclusive Culture, and (3) Build and Maintain a Diverse Workforce.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	B.4. The agency has sufficient budget and staffing to support the success of its EEO program.				
	B.4.a. Pursuant to 29 CFR §1614.102(a)(1), has the agency allocated sufficient funding and qualified staffing to successfully implement the EEO program, for the following areas:				
	B.4.a.1. to conduct a self-assessment of the agency for possible program deficiencies? [see MD-715, II(D)]	X			
	B.4.a.10. to effectively manage its reasonable accommodation program? [see 29 CFR §1614.203(d)(4)(ii)]	X			
	B.4.a.11. to ensure timely and complete compliance with EEOC orders? [see MD-715, II(E)]		X		
	B.4.a.2. to enable the agency to conduct a thorough barrier analysis of its workforce? [see MD-715, II(B)]		X		
	B.4.a.3. to timely, thoroughly, and fairly process EEO complaints, including EEO counseling, investigations, final agency decisions, and legal sufficiency reviews? [see 29 CFR §§ 1614.102(c)(5); 1614.105(b) – (f); MD-110, Ch. 1(IV)(D) & 5(IV); MD-715, II(E)]	X			
	B.4.a.4. to provide all supervisors and employees with training on the EEO program, including but not limited to retaliation, harassment, religious accommodations, disability accommodations, the EEO complaint process, and ADR? [see MD-715, II(B) and III(C)] If not, please identify the type(s) of training with insufficient funding in the comments column.	X			
	B.4.a.5. to conduct thorough, accurate, and effective field audits of the EEO programs in components and the field offices, if applicable? [see 29 CFR §1614.102(c)(2)]			X	The FDA Centers do not have standalone EEO programs.
	B.4.a.6. to publish and distribute EEO materials (e.g. harassment policies, EEO posters, reasonable accommodations procedures)? [see MD-715, II(B)]	X			
	B.4.a.7. to maintain accurate data collection and tracking systems for the following types of data: complaint tracking, workforce demographics, and applicant flow data? [see MD-715, II(E)] If not, please identify the systems with insufficient funding in the comments section.	X			
	B.4.a.8. to effectively administer its special emphasis programs (such as, Federal Women's Program, Hispanic Employment Program, and People with Disabilities Program Manager)? [5 USC § 7201; 38 USC § 4214; 5 CFR § 720.204; 5 CFR § 213.3102(t) and (u); 5 CFR § 315.709]		X		
	B.4.a.9. to effectively manage its anti-harassment program? [see MD-715 Instructions, Sec. I; EEOC Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (1999), § V.C. 1]			X	The FDA did not have an Anti-Harassment Program in FY20, thus we didn't have a process in place to comply with this measure. See Part H on measure C.2.a for planned activities to address this deficiency.
	B.4.b. Does the EEO office have a budget that is separate from other offices within the agency? [see 29 CFR § 1614.102(a)(1)]	X			
	B.4.c. Are the duties and responsibilities of EEO officials clearly defined? [see MD-110, Ch. 1(III)(A), 2(III), & 6(III)]	X			

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

B.4.d. Does the agency ensure that all new counselors and investigators, including contractors and collateral duty employees, receive the required 32 hours of training, pursuant to Ch. 2(II) (A) of MD-110?		X			
B.4.e. Does the agency ensure that all experienced counselors and investigators, including contractors and collateral duty employees, receive the required 8 hours of annual refresher training, pursuant to Ch. 2(II)(C) of MD-110?		X			
 Compliance Indicator	B.5. The agency recruits, hires, develops, and retains supervisors and managers who have effective managerial, communications, and interpersonal skills	Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
 Measures		Yes	No	N/A	
B.5.a. Pursuant to 29 CFR §1614.102(a)(5), have all managers and supervisors received orientation, training, and advice on their responsibilities under the following areas under the agency EEO program:					
B.5.a.1. EEO complaint process? [see MD-715(II)(B)]		X			
B.5.a.2. Reasonable Accommodation Procedures? [see 29 CFR § 1614.102(d)(3)]		X			
B.5.a.3. Anti-harassment policy? [see MD-715(II)(B)]				X	The FDA did not issue an Anti-Harassment Policy in FY20, thus we didn't have a process in place to comply with this measure. See Part H on measure C.2.a for planned activities to address this deficiency.
B.5.a.4. Supervisory, managerial, communication and interpersonal skills in order to supervise most effectively in a workplace with diverse employees and avoid disputes arising from ineffective communications? [see MD-715, II(B)]		X			
B.5.a.5. ADR, with emphasis on the federal government's interest in encouraging mutual resolution of disputes and the benefits associated with utilizing ADR? [see MD-715(II)(E)]		X			

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist



 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	B.6. The agency involves managers in the implementation of its EEO program.				
B.6.a. Are senior managers involved in the implementation of Special Emphasis Programs? [see MD-715 Instructions, Sec. I]		X			
B.6.b. Do senior managers participate in the barrier analysis process? [see MD-715 Instructions, Sec. I]				X	The FDA did not conduct a thorough barrier analysis in FY20, thus we didn't have corresponding action plans to comply with this measure.
B.6.c. When barriers are identified, do senior managers assist in developing agency EEO action plans (Part I, Part J, or the Executive Summary)? [see MD-715 Instructions, Sec. I]				X	The FDA did not conduct a thorough barrier analysis in FY20, thus we didn't have corresponding action plans to comply with this measure.
B.6.d. Do senior managers successfully implement EEO Action Plans and incorporate the EEO Action Plan Objectives into agency strategic plans? [29 CFR §1614.102(a)(5)]		X			

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist

Essential Element: C Management and Program Accountability

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	C.1. The agency conducts regular internal audits of its component and field offices.			N/A	
C.1.a. Does the agency regularly assess its component and field offices for possible EEO program deficiencies? [see 29 CFR §1614.102(c)(2)] If "yes", please provide the schedule for conducting audits in the comments section.				X	The FDA Centers do not have standalone EEO programs.
C.1.b. Does the agency regularly assess its component and field offices on their efforts to remove barriers from the workplace? [see 29 CFR §1614.102(c)(2)] If "yes", please provide the schedule for conducting audits in the comments section.			X		
C.1.c. Do the component and field offices make reasonable efforts to comply with the recommendations of the field audit? [see MD-715, II(C)]				X	The FDA did not conduct field audits in FY20, thus is cannot comply with this measure.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	C.2. The agency has established procedures to prevent all forms of EEO discrimination.				
C.2.a. Has the agency established comprehensive anti-harassment policy and procedures that comply with EEOC's enforcement guidance? [see MD-715, II(C); Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (Enforcement Guidance), EEOC No. 915.002, § V.C.1 (June 18, 1999)]			X		
C.2.a.1. Does the anti-harassment policy require corrective action to prevent or eliminate conduct before it rises to the level of unlawful harassment? [see EEOC Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (1999), § V.C.1]				X	The FDA did not have an Anti-Harassment Policy in FY20, thus we didn't have a process in place to comply with this measure. See Part H on measure C.2.a for planned activities to address this deficiency.
C.2.a.2. Has the agency established a firewall between the Anti-Harassment Coordinator and the EEO Director? [see EEOC Report, Model EEO Program Must Have an Effective Anti-Harassment Program (2006)]				X	The FDA did not have an Anti-Harassment Coordinator in FY20, thus we didn't have a structure in place to comply with this measure. See Part H on measure C.2.a for planned activities to address this deficiency.
C.2.a.3. Does the agency have a separate procedure (outside the EEO complaint process) to address harassment allegations? [see Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (Enforcement Guidance), EEOC No. 915.002, § V.C.1 (June 18, 1999)]				X	The FDA did not have an Anti-Harassment Program in FY20, thus we didn't have a process in place to comply with this measure. See Part H on measure C.2.a for planned activities to address this deficiency.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist

<p>C.2.a.4. Does the agency ensure that the EEO office informs the anti-harassment program of all EEO counseling activity alleging harassment? [See Enforcement Guidance, V.C.]</p>			<p>X The FDA did not have an Anti-Harassment Program in FY20, thus we didn't have a process in place to comply with this measure. See Part H on measure C.2.a for planned activities to address this deficiency.</p>
<p>C.2.a.5. Does the agency conduct a prompt inquiry (beginning within 10 days of notification) of all harassment allegations, including those initially raised in the EEO complaint process? [see Complainant v. Dep't of Veterans Affairs, EEOC Appeal No. 0120123232 (May 21, 2015); Complainant v. Dep't of Defense (Defense Commissary Agency), EEOC Appeal No. 0120130331 (May 29, 2015)] If "no", please provide the percentage of timely-processed inquiries in the comments column.</p>			<p>X The FDA did not have an Anti-Harassment Program in FY20, thus we didn't have a process in place to comply with this measure. See Part H on measure C.2.a for planned activities to address this deficiency.</p>
<p>C.2.a.6. Do the agency's training materials on its anti-harassment policy include examples of disability-based harassment? [see 29 CFR §1614.203(d)(2)]</p>			<p>X The FDA did not have an Anti-Harassment Program in FY20, thus we didn't have a process in place to comply with this measure. See Part H on measure C.2.a for planned activities to address this deficiency.</p>
<p>C.2.b. Has the agency established disability reasonable accommodation procedures that comply with EEOC's regulations and guidance? [see 29 CFR §1614.203(d)(3)]</p>	<p>X</p>		<p>The Reasonable Accommodation Office (RAO) is currently in the final stages of completing revised agency procedures projected to be published during FY21.</p>
<p>C.2.b.1. Is there a designated agency official or other mechanism in place to coordinate or assist with processing requests for disability accommodations throughout the agency? [see 29 CFR §1614.203(d)(3)(D)]</p>	<p>X</p>		<p>The RAO is designated to process RA requests for the Agency.</p>

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

<p>C.2.b.2. Has the agency established a firewall between the Reasonable Accommodation Program Manager and the EEO Director? [see MD-110, Ch. 1(IV)(A)]</p>	<p>X</p>		<p>The RAO is aligned under the Division of Compliance and Conflict Prevention (DCCP) within the Office of Enterprise Management Services (OEMS).</p>
<p>C.2.b.3. Does the agency ensure that job applicants can request and receive reasonable accommodations during the application and placement processes? [see 29 CFR §1614.203(d)(1)(ii)(B)]</p>	<p>X</p>		<p>The RA policy and applicant process are included on all FDA job announcements. Office of Talent Solutions (OTS), in consultation with the RAO, are responsible for ensuring that applicants receive reasonable accommodation information/ instruction during application and placement processes, if requested.</p>
<p>C.2.b.4. Do the reasonable accommodation procedures clearly state that the agency should process the request within a maximum amount of time (e.g., 20 business days), as established by the agency in its affirmative action plan? [see 29 CFR §1614.203(d)(3)(i)(M)]</p>	<p>X</p>		<p>Within 60 business days</p>
<p>C.2.b.5. Does the agency process all initial accommodation requests, excluding ongoing interpretative services, within the time frame set forth in its reasonable accommodation procedures? [see MD-715, II(C)] If “no”, please provide the percentage of timely-processed requests, excluding ongoing interpretative services, in the comments column.</p>		<p>X</p>	<p>90% of reasonable accommodation requests during FY20 were processed according to the mandated time frame.</p>
<p>C.2.c. Has the agency established procedures for processing requests for personal assistance services that comply with EEOC’s regulations, enforcement guidance, and other applicable executive orders, guidance, and standards? [see 29 CFR §1614.203(d)(6)]</p>	<p>X</p>		<p>Personal Assistance Services (PAS) are provided at the Department level by HHS for FDA employees.</p>
<p>C.2.c.1. Does the agency post its procedures for processing requests for Personal Assistance Services on its public website? [see 29 CFR §1614.203(d)(5)(v)] If “yes”, please provide the internet address in the comments column.</p>		<p>X</p>	

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020





Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	C.3. The agency evaluates managers and supervisors on their efforts to ensure equal employment opportunity.				
	C.3.a. Pursuant to 29 CFR §1614.102(a)(5), do all managers and supervisors have an element in their performance appraisal that evaluates their commitment to agency EEO policies and principles and their participation in the EEO program?	X			
	C.3.b. Does the agency require rating officials to evaluate the performance of managers and supervisors based on the following activities:				
	C.3.b.1. Resolve EEO problems/disagreements/conflicts, including the participation in ADR proceedings? [see MD-110, Ch. 3.I]	X			
	C.3.b.2. Ensure full cooperation of employees under his/her supervision with EEO officials, such as counselors and investigators? [see 29 CFR §1614.102(b)(6)]	X			
	C.3.b.3. Ensure a workplace that is free from all forms of discrimination, including harassment and retaliation? [see MD-715, II(C)]	X			
	C.3.b.4. Ensure that subordinate supervisors have effective managerial, communication, and interpersonal skills to supervise in a workplace with diverse employees? [see MD-715 Instructions, Sec. I]	X			
	C.3.b.5. Provide religious accommodations when such accommodations do not cause an undue hardship? [see 29 CFR §1614.102(a)(7)]	X			
	C.3.b.6. Provide disability accommodations when such accommodations do not cause an undue hardship? [see 29 CFR §1614.102(a)(8)]	X			
	C.3.b.7. Support the EEO program in identifying and removing barriers to equal opportunity?. [see MD-715, II(C)]	X			
	C.3.b.8. Support the anti-harassment program in investigating and correcting harassing conduct?. [see Enforcement Guidance, V.C.2]			X	.The FDA did not have an Anti-Harassment Program in FY20, thus we didn't have a process in place to comply with this measure. See Part H on measure C.2.a for planned activities to address this deficiency.
	C.3.b.9. Comply with settlement agreements and orders issued by the agency, EEOC, and EEO-related cases from the Merit Systems Protection Board, labor arbitrators, and the Federal Labor Relations Authority? [see MD-715, II(C)]	X			
	C.3.c. Does the EEO Director recommend to the agency head improvements or corrections, including remedial or disciplinary actions, for managers and supervisors who have failed in their EEO responsibilities? [see 29 CFR §1614.102(c)(2)]	X			
	C.3.d. When the EEO Director recommends remedial or disciplinary actions, are the recommendations regularly implemented by the agency? [see 29 CFR §1614.102(c)(2)]	X			

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	C.4. The agency ensures effective coordination between its EEO program and Human Resources (HR) program.				
	C.4.a. Do the HR Director and the EEO Director meet regularly to assess whether personnel programs, policies, and procedures conform to EEOC laws, instructions, and management directives? [see 29 CFR §1614.102(a)(2)]	X			
	C.4.b. Has the agency established timetables/schedules to review at regular intervals its merit promotion program, employee recognition awards program, employee development/training programs, and management/personnel policies, procedures, and practices for systemic barriers that may be impeding full participation in the program by all EEO groups? [see MD-715 Instructions, Sec. I]	X			
	C.4.c. Does the EEO office have timely access to accurate and complete data (e.g., demographic data for the workforce, applicants, training programs, etc.) required to prepare the MD-715 workforce data tables? [see 29 CFR §1614.601(a)]		X		
	C.4.d. Does the HR office timely provide the EEO office with access to other data (e.g., exit interview data, climate assessment surveys, and grievance data), upon request? [see MD-715, II(C)]	X			
	C.4.e. Pursuant to Section II(C) of MD-715, does the EEO office collaborate with the HR office to:				
	C.4.e.1. Implement the Affirmative Action Plan for Individuals with Disabilities? [see 29 CFR §1614.203(d); MD-715, II(C)]	X			
	C.4.e.2. Develop and/or conduct outreach and recruiting initiatives? [see MD-715, II(C)]	X			
	C.4.e.3. Develop and/or provide training for managers and employees? [see MD-715, II(C)]	X			
	C.4.e.4. Identify and remove barriers to equal opportunity in the workplace? [see MD-715, II(C)]	X			
	C.4.e.5. Assist in preparing the MD-715 report? [see MD-715, II(C)]	X			
 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
 Measures	C.5. Following a finding of discrimination, the agency explores whether it should take a disciplinary action.	Yes	No	N/A	
	C.5.a. Does the agency have a disciplinary policy and/or table of penalties that covers discriminatory conduct? [see 29 CFR §1614.102(a)(6); see also Douglas v. Veterans Administration, 5 MSPR 280 (1981)]	X			
	C.5.b. When appropriate, does the agency discipline or sanction managers and employees for discriminatory conduct? [see 29 CFR §1614.102(a)(6)] If "yes", please state the number of disciplined/sanctioned individuals during this reporting period in the comments.	X			There were none identified for FY20.
	C.5.c. If the agency has a finding of discrimination (or settles cases in which a finding was likely), does the agency inform managers and supervisors about the discriminatory conduct (e.g., post mortem to discuss lessons learned)? [see MD-715, II(C)]	X			

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist





 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	C.6. The EEO office advises managers/supervisors on EEO matters.			N/A	
C.6.a. Does the EEO office provide management/supervisory officials with regular EEO updates on at least an annual basis, including EEO complaints, workforce demographics and data summaries, legal updates, barrier analysis plans, and special emphasis updates? [see MD-715 Instructions, Sec. I] If "yes", please identify the frequency of the EEO updates in the comments column.		X			In FY20 OEEO provided EEO updates at least on a quarterly basis.
C.6.b. Are EEO officials readily available to answer managers' and supervisors' questions or concerns? [see MD-715 Instructions, Sec. I]		X			

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist



Essential Element: D Proactive Prevention

 Compliance Indicator		Measure Has Been Met			
 Measures		Yes	No	N/A	For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
D.1.a. Does the agency have a process for identifying triggers in the workplace? [see MD-715 Instructions, Sec. I]		X			
D.1.b. Does the agency regularly use the following sources of information for trigger identification: workforce data; complaint/grievance data; exit surveys; employee climate surveys; focus groups; affinity groups; union; program evaluations; special emphasis programs; and/or external special interest groups? [see MD-715 Instructions, Sec. I]		X			
D.1.c. Does the agency conduct exit interviews or surveys that include questions on how the agency could improve the recruitment, hiring, inclusion, retention and advancement of individuals with disabilities? [see 29 CFR §1614.203(d)(1)(iii)(C)]			X		
 Compliance Indicator		Measure Has Been Met			
 Measures		Yes	No	N/A	For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
D.2.a. Does the agency have a process for analyzing the identified triggers to find possible barriers? [see MD-715, (II)(B)]	D.2. The agency identifies areas where barriers may exclude EEO groups (reasonable basis to act.)			X	The FDA did not conduct a barrier analysis in FY20, thus we did not identify triggers and could not analyze them. See Part H on B.4.a.2. for planned activities to address this deficiency.
D.2.b. Does the agency regularly examine the impact of management/personnel policies, procedures, and practices by race, national origin, sex, and disability? [see 29 CFR §1614.102(a)(3)]		X			
D.2.c. Does the agency consider whether any group of employees or applicants might be negatively impacted prior to making human resource decisions, such as re-organizations and realignments? [see 29 CFR §1614.102(a)(3)]		X			
D.2.d. Does the agency regularly review the following sources of information to find barriers: complaint/grievance data, exit surveys, employee climate surveys, focus groups, affinity groups, union, program evaluations, anti-harassment program, special emphasis programs, and/or external special interest groups? [see MD-715 Instructions, Sec. I] If "yes", please identify the data sources in the comments column.			X		

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	D.3. The agency establishes appropriate action plans to remove identified barriers.				
	D.3.a. Does the agency effectively tailor action plans to address the identified barriers, in particular policies, procedures, or practices? [see 29 CFR §1614.102(a)(3)]			X	The FDA did not conduct a thorough barrier analysis in FY20, thus we didn't have corresponding action plans to comply with this measure.
	D.3.b. If the agency identified one or more barriers during the reporting period, did the agency implement a plan in Part I, including meeting the target dates for the planned activities? [see MD-715, II(D)]			X	.The FDA did not conduct a thorough barrier analysis in FY20, thus we didn't identify barriers and determine planned activities to comply with this measure.
	D.3.c. Does the agency periodically review the effectiveness of the plans? [see MD-715, II(D)]			X	The FDA did not conduct a thorough barrier analysis in FY20, thus we didn't develop plans to review.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	D.4. The agency has an affirmative action plan for people with disabilities, including those with targeted disabilities.				
	D.4.a. Does the agency post its affirmative action plan on its public website? [see 29 CFR §1614.203(d)(4)] If yes, please provide the internet address in the comments.	X			https://www.fda.gov/about-fda/office-operations/office-equal-employment-opportunity
	D.4.b. Does the agency take specific steps to ensure qualified people with disabilities are aware of and encouraged to apply for job vacancies? [see 29 CFR §1614.203(d)(1)(i)]	X			
	D.4.c. Does the agency ensure that disability-related questions from members of the public are answered promptly and correctly? [see 29 CFR §1614.203(d)(1)(ii)(A)]	X			
	D.4.d. Has the agency taken specific steps that are reasonably designed to increase the number of persons with disabilities or targeted disabilities employed at the agency until it meets the goals? [see 29 CFR §1614.203(d)(7)(ii)]	X			

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

Essential Element: E Efficiency

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	E.1. The agency maintains an efficient, fair, and impartial complaint resolution process.				
E.1.a. Does the agency timely provide EEO counseling, pursuant to 29 CFR §1614.105?		X			
E.1.b. Does the agency provide written notification of rights and responsibilities in the EEO process during the initial counseling session, pursuant to 29 CFR §1614.105(b)(1)?		X			
E.1.c. Does the agency issue acknowledgment letters immediately upon receipt of a formal complaint, pursuant to MD-110, Ch. 5(I)?		X			
E.1.d. Does the agency issue acceptance letters/dismissal decisions within a reasonable time (e.g., 60 days) after receipt of the written EEO Counselor report, pursuant to MD-110, Ch. 5(I)? If so, please provide the average processing time in the comments.		X			The Agency issues acceptance/dismissal letters within 40 to 50 days after receipt of EEO Counselor report.
E.1.e. Does the agency ensure that all employees fully cooperate with EEO counselors and EEO personnel in the EEO process, including granting routine access to personnel records related to an investigation, pursuant to 29 CFR §1614.102(b)(6)?		X			
E.1.f. Does the agency timely complete investigations, pursuant to 29 CFR §1614.108?		X			
E.1.g. If the agency does not timely complete investigations, does the agency notify complainants of the date by which the investigation will be completed and of their right to request a hearing or file a lawsuit, pursuant to 29 CFR §1614.108(g)?		X			
E.1.h. When the complainant did not request a hearing, does the agency timely issue the final agency decision, pursuant to 29 CFR §1614.110(b)?				X	Final Agency Decision (FAD) are under the jurisdiction of HHS, EEODI and it has been often noted that the FAD's are not always completed within 60 days pursuant to 29 CFR §1614.110(b).
E.1.i. Does the agency timely issue final actions following receipt of the hearing file and the administrative judge's decision, pursuant to 29 CFR §1614.110(a)?				X	Final Agency Decision (FAD) are under the jurisdiction of HHS, EEODI and it has been often noted that the FAD's are not always completed within 60 days pursuant to 29 CFR §1614.110(b).

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

E.1.j. If the agency uses contractors to implement any stage of the EEO complaint process, does the agency hold them accountable for poor work product and/or delays? [See MD-110, Ch. 5(V)(A)] If "yes", please describe how in the comments column.		X			FDA uses HHS centralized contract to carry out this action.
E.1.k. If the agency uses employees to implement any stage of the EEO complaint process, does the agency hold them accountable for poor work product and/or delays during performance review? [See MD-110, Ch. 5(V)(A)]		X			
E.1.l. Does the agency submit complaint files and other documents in the proper format to EEOC through the Federal Sector EEO Portal (FedSEP)? [See 29 CFR § 1614.403(g)]		X			
 Compliance Indicator	E.2. The agency has a neutral EEO process.	Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
 Measures		Yes	No	N/A	
E.2.a. Has the agency established a clear separation between its EEO complaint program and its defensive function? [see MD-110, Ch. 1(IV)(D)] If "yes", please explain.		X			The EEO, ERLR, ADR, and FDA Settlement official all report to the COO. ERLR & ADR report indirectly and are assigned to different office directors under the COO.
E.2.b. When seeking legal sufficiency reviews, does the EEO office have access to sufficient legal resources separate from the agency representative? [see MD-110, Ch. 1(IV)(D)] If "yes", please identify the source/ location of the attorney who conducts the legal sufficiency review in the comments column.			X		
E.2.c. If the EEO office relies on the agency's defensive function to conduct the legal sufficiency review, is there a firewall between the reviewing attorney and the agency representative? [see MD-110, Ch. 1(IV)(D)]				X	EEO does not rely on the agency's defensive function to conduct the legal sufficiency reviews
E.2.d. Does the agency ensure that its agency representative does not intrude upon EEO counseling, investigations, and final agency decisions? [see MD-110, Ch. 1(IV)(D)]		X			
E.2.e. If applicable, are processing time frames incorporated for the legal counsel's sufficiency review for timely processing of complaints? [see EEOC Report, Attaining a Model Agency Program: Efficiency (Dec. 1, 2004)]				X	Not applicable to the FDA.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	E.3. The agency has established and encouraged the widespread use of a fair alternative dispute resolution (ADR) program.				
	E.3.a. Has the agency established an ADR program for use during both the pre-complaint and formal complaint stages of the EEO process? [see 29 CFR §1614.102(b)(2)]	X			
	E.3.b. Does the agency require managers and supervisors to participate in ADR once it has been offered? [see MD-715, II(A)(1)]	X			
	E.3.c. Does the Agency encourage all employees to use ADR, where ADR is appropriate? [See MD-110, Ch. 3(IV)(C)]	X			
	E.3.d. Does the agency ensure a management official with settlement authority is accessible during the dispute resolution process? [see MD-110, Ch. 3(III)(A)(9)]	X			
	E.3.e. Does the agency prohibit the responsible management official named in the dispute from having settlement authority? [see MD-110, Ch. 3(I)]	X			
	E.3.f. Does the agency annually evaluate the effectiveness of its ADR program? [see MD-110, Ch. 3(II)(D)]	X			

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020



Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	E.4. The agency has effective and accurate data collection systems in place to evaluate its EEO program.				
E.4.a. Does the agency have systems in place to accurately collect, monitor, and analyze the following data:					
E.4.a.1. Complaint activity, including the issues and bases of the complaints, the aggrieved individuals/complainants, and the involved management official? [see MD-715, II(E)]		X			
E.4.a.2. The race, national origin, sex, and disability status of agency employees? [see 29 CFR §1614.601(a)]		X			
E.4.a.3. Recruitment activities? [see MD-715, II(E)]		X			
E.4.a.4. External and internal applicant flow data concerning the applicants' race, national origin, sex, and disability status? [see MD-715, II(E)]		X			
E.4.a.5. The processing of requests for reasonable accommodation? [29 CFR §1614.203(d)(4)]		X			
E.4.a.6. The processing of complaints for the anti-harassment program? [see EEOC Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (1999), § V.C.2]				X	The FDA did not have an Anti-Harassment Program in FY20, thus we didn't have a process in place to comply with this measure. See Part H on measure C.2.a for planned activities to address this deficiency.
E.4.b. Does the agency have a system in place to re-survey the workforce on a regular basis? [MD-715 Instructions, Sec. I]		X			

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist



 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	E.5. The agency identifies and disseminates significant trends and best practices in its EEO program.				
E.5.a. Does the agency monitor trends in its EEO program to determine whether the agency is meeting its obligations under the statutes EEOC enforces? [see MD-715, II(E)] If "yes", provide an example in the comments.		X			The FDA OEEO staff regularly meets with EEOC representatives and other HHS OpDiv EEO officials to stay up-to-date with trends and best practices in the EEO arena.
E.5.b. Does the agency review other agencies' best practices and adopt them, where appropriate, to improve the effectiveness of its EEO program? [see MD-715, II(E)] If "yes", provide an example in the comments.		X			The FDA OEEO staff leveraged relationships with other HHS OpDivs of similar size to learn about their EEO best practices, including NIH and the CDC,
E.5.c. Does the agency compare its performance in the EEO process to other federal agencies of similar size? [see MD-715, II(E)]		X			

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist





Essential Element: F Responsiveness and Legal Compliance

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	F.1. The agency has processes in place to ensure timely and full compliance with EEOC orders and settlement agreements.				
	F.1.a. Does the agency have a system of management controls to ensure that its officials timely comply with EEOC orders/directives and final agency actions? [see 29 CFR §1614.102(e); MD-715, II(F)]	X			
	F.1.b. Does the agency have a system of management controls to ensure the timely, accurate, and complete compliance with resolutions/settlement agreements? [see MD-715, II(F)]	X			
	F.1.c. Are there procedures in place to ensure the timely and predictable processing of ordered monetary relief? [see MD-715, II(F)]	X			
	F.1.d. Are procedures in place to process other forms of ordered relief promptly? [see MD-715, II(F)]	X			
	F.1.e. When EEOC issues an order requiring compliance by the agency, does the agency hold its compliance officer(s) accountable for poor work product and/or delays during performance review? [see MD-110, Ch. 9(IX)(H)]			X	This does not fall under the purview of FDA, OEEO. When EEOC issues an order, compliance is required by the Director of EEODI, Compliance and Operations Division at HHS. They have the authority to hold compliance officer(s) and or OpDivs accountable.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Agency Self-Assessment Checklist

 Compliance Indicator		Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
		Yes	No	N/A	
 Measures	F.2. The agency complies with the law, including EEOC regulations, management directives, orders, and other written instructions.				
	F.2.a. Does the agency timely respond and fully comply with EEOC orders? [see 29 CFR §1614.502; MD-715, II(E)]	X			
	F.2.a.1. When a complainant requests a hearing, does the agency timely forward the investigative file to the appropriate EEOC hearing office? [see 29 CFR §1614.108(g)]	X			
	F.2.a.2. When there is a finding of discrimination that is not the subject of an appeal by the agency, does the agency ensure timely compliance with the orders of relief? [see 29 CFR §1614.501]	X			
	F.2.a.3. When a complainant files an appeal, does the agency timely forward the investigative file to EEOC's Office of Federal Operations? [see 29 CFR §1614.403(e)]	X			
	F.2.a.4. Pursuant to 29 CFR §1614.502, does the agency promptly provide EEOC with the required documentation for completing compliance?	X			
 Compliance Indicator	F.3. The agency reports to EEOC its program efforts and accomplishments.	Measure Has Been Met			For all unmet measures, provide a brief explanation in the space below or complete and attach an EEOC FORM 715-01 PART H to the agency's status report
 Measures		Yes	No	N/A	
	F.3.a. Does the agency timely submit to EEOC an accurate and complete No FEAR Act report? [Public Law 107-174 (May 15, 2002), §203(a)]			X	Currently, this does not fall under the purview of FDA, OEEEO Compliance (Informal/Formal) function. Handled at the DHHS level.
	F.3.b. Does the agency timely post on its public webpage its quarterly No FEAR Act data? [see 29 CFR §1614.703(d)]		X		

Essential Element: Other

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.1

Brief Description of Program Deficiency:	A.1.a. Does the agency annually issue a signed and dated EEO policy statement on agency letterhead that clearly communicates the agency's commitment to EEO for all employees and applicants? If "Yes", please provide the annual issuance date in the comments column. [see MD-715, II(A)]
--	---

The agency doesn't annually issue a signed and dated EEO policy statement on agency letterhead that clearly communicates the agency's commitment to EEO for all employees and applicants.

Objectives for EEO Plan

Date Initiated	Target Date	Date Modified	Date Completed	Objective Description
07/30/2020	09/30/2021			The FDA will issue a new, compliant EEO Policy Statement by September 30, 2021 and update every subsequent year.

Responsible Officials

Title	Name	Standards Address the Plan?
EEO Director	LaKeisha McClendon	Yes

Planned Activities

Target Date	Planned Activity	Sufficient Staffing & Funding?	Modified Date	Completion Date
09/30/2021	OEEO will draft an updated EEO Policy Statement that is timely and compliant with EEOC Guidance, for review, approval, and dissemination by the FDA Commissioner. The statement will include all the principles outlined by the EEOC and will be communicated to all FDA employees in an agency-wide email announcement. The policy statement will also be added to the FDA external website and will be posted in other communication tools throughout the agency, as allowable by COVID-related restrictions.	Yes		

Accomplishments

Fiscal Year	Accomplishment
2020	Accomplishments will be included in the FY21 MD-715 Report.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.2

Brief Description of Program Deficiency: A.3.a. Does the agency provide recognition to employees, supervisors, managers and units demonstrating superior accomplishment in equal employment opportunity? [see 29 CFR § 1614.102(a)(9)] If "yes", provide one or two examples in the comments section. .
The FDA doesn't provide recognition to employees, supervisors, managers, and units demonstrating superior accomplishment in equal employment opportunity.

Objectives for EEO Plan

Date Initiated	Target Date	Date Modified	Date Completed	Objective Description
07/30/2020	09/30/2022			FDA will create a structure to award employees, supervisors, managers, and units on EEO activities.

Responsible Officials

Title	Name	Standards Address the Plan?
EEO Director	LaKeisha McClendon	Yes

Planned Activities

Target Date	Planned Activity	Sufficient Staffing & Funding?	Modified Date	Completion Date
05/30/2022	A process and schedule will be developed for an iterative review of the policies and practices related to employee recognition awards, allowing for compliance with this area.	Yes		
09/30/2022	OEEO will work with the Office of Human Capital Management to identify target recognition programs, and incorporate EEO language in existing awards	Yes		

Accomplishments

Fiscal Year	Accomplishment
2020	Accomplishments will be included in the FY21 MD-715 Report.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.3

Brief Description of Program
Deficiency:

B.4.a.8. to effectively administer its special emphasis programs (such as, Federal Women's Program, Hispanic Employment Program, and People with Disabilities Program Manager)? [5 USC § 7201; 38 USC § 4214; 5 CFR § 720.204; 5 CFR § 213.3102(t) and (u); 5 CFR § 315.709]

See Part H on measure B.4.a.2.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.4

Brief Description of Program
Deficiency:

B.4.a.5. to conduct thorough, accurate, and effective field audits of the EEO programs in components and the field offices, if applicable? [see 29 CFR §1614.102(c)(2)]

See Part H on measure B.4.a.2.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.5

Brief Description of Program
Deficiency:

B.4.a.11. to ensure timely and complete compliance with EEOC orders? [see MD-715, II(E)]

See Part H on measure B.4.a.2.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.6

Brief Description of Program
Deficiency:

B.1.a. Is the agency head the immediate supervisor of the person ("EEO Director") who has day-to-day control over the EEO office?
[see 29 CFR §1614.102(b)(4)]

The agency head is not the immediate supervisor of the person ("EEO Director") who has day-to-day control over the EEO office. HHS will develop a global approach to align all the EEO Directors within HHS with their respective Agency heads. See the HHS MD-717 Part H.26

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.7

Brief Description of Program Deficiency:

B.4.a.2. to enable the agency to conduct a thorough barrier analysis of its workforce? [see MD-715, II(B)]

This Part H applies to measures B.4.a.2, B.4.a.8, and B.4.a.11. The agency has not allocated sufficient funding and qualified staffing to 1) to enable the agency to conduct a thorough barrier analysis of its workforce; 2) to effectively administer its special emphasis programs (such as, Federal Women's Program, Hispanic Employment Program, and People with Disabilities Program Manager)?; and 3) to ensure timely and complete compliance with EEOC orders.

Objectives for EEO Plan

Date Initiated	Target Date	Date Modified	Date Completed	Objective Description
07/30/2020	09/30/2022			Hire qualified staffing to successfully implement the EEO Program functions and leverage experienced contract support to mitigate gaps and continue meeting OEEO's numerous obligations.

Responsible Officials

Title	Name	Standards Address the Plan?
EEO Director	LaKeisha McClendon	Yes

Planned Activities

Target Date	Planned Activity	Sufficient Staffing & Funding?	Modified Date	Completion Date
03/30/2021	Recruit a Diversity, Equity, and Inclusion Program Manager tasked with the oversight, implementation, and operations of new and/or existing Diversity, Equity and Inclusion programs.	Yes		
09/30/2022	Hire additional staff in various positions, including Special Emphasis Program Managers, EEO Specialists, and a Data Analyst to provide support to the Diversity and Compliance Staff.	Yes		
12/15/2021	The OEEO will develop a barrier analysis strategy and streamlined process for the FDA to determine triggers and find possible barriers, including the review of policies, procedures and practices by race, national origin, sex and disability.	Yes		

Accomplishments

Fiscal Year	Accomplishment
2020	<p>In FY20, FDA OEEO staff was comprised of 11 dedicated employees who handle the agency's informal and formal EEO complaint processes, DEI efforts, and compliance reporting.</p> <p>FDA OEEO has undergone an extensive transition due to retirements, attrition, and voluntary resignation. Nevertheless, the FDA OEEO staff has continued to handle time sensitive EEO informal and formal complaints and submitted its compliance reports on time, despite the dearth of employees. The OEEO Director has also leveraged experienced contract support to mitigate the gaps and continue meeting the OEEO's numerous obligations.</p> <p>OEEO has brought on contractors to assist in Office operations until such time as full-time staff can be added. Future hiring focus will be on our Diversity function and both formal and informal complaint process.</p>

Objectives for EEO Plan

Date Initiated	Target Date	Date Modified	Date Completed	Objective Description
07/30/2020	08/31/2021			Ensure the FDA OEEO has sufficient budget and qualified staffing to support the success of the EEO program.

Responsible Officials

Title	Name	Standards Address the Plan?
EEO Director	LaKeisha McClendon	Yes

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

Planned Activities

Target Date	Planned Activity	Sufficient Staffing & Funding?	Modified Date	Completion Date
08/31/2021	Perform an evaluation of the FDA's OEEO to identify trends and gaps in the FDA's compliance with federal EEO regulations and to determine areas where FDA could allocate additional funding and permanent staff.	Yes		

Accomplishments

Fiscal Year	Accomplishment
2020	Accomplishments will be included in the FY21 MD-715 report.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.8

Brief Description of Program Deficiency: B.1.c. During this reporting period, did the EEO Director present to the head of the agency, and other senior management officials, the "State of the agency" briefing covering the six essential elements of the model EEO program and the status of the barrier analysis process? [see MD-715 Instructions, Sec. I] If "yes", please provide the date of the briefing in the comments column.

During this reporting period, the EEO Director did not present to the head of the agency, and other senior management officials, the "State of the Agency" briefing covering the six essential elements of the model EEO program.

Objectives for EEO Plan

Date Initiated	Target Date	Date Modified	Date Completed	Objective Description
07/30/2020	09/30/2022			Each fiscal year, the EEO Director will present to the the head of the agency, and other senior management officials, the "State of the Agency" briefing covering the six essential elements of the model EEO program and the status of the barrier analysis process.

Responsible Officials

Title	Name	Standards Address the Plan?
EEO Director	LaKeisha McClendon	Yes

Planned Activities

Target Date	Planned Activity	Sufficient Staffing & Funding?	Modified Date	Completion Date
11/30/2021	OEEEO will develop a detailed timeline that includes a State of the Agency briefing to senior management officials and the FDA Commissioner.	Yes		
04/30/2022	OEEEO will provide a State of the Agency briefing to senior management officials and the designated Head of Agency prior to submitting the FY21 MD-715 Report.	Yes		

Accomplishments

Fiscal Year	Accomplishment
2020	<p>The Director of the Office of Equal Employment Opportunity (OEEEO) presented the head of the Agency with a document that set forth the OEEEO's various initiatives and summarized its successes and challenges. The document contained an executive summary, deficiencies, accomplishments, workforce overview, and barrier analysis, and was reviewed by the COO.</p> <p>However, Ms. McClendon did not meet with the Commissioner. In the future, the OEEEO Director will explore holding a live "State of the Agency" briefing to the Agency head, per EEOC requirements. Any meeting with the FDA Commissioner will have to be contingent on Commissioner availability.</p>

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.9

Brief Description of Program Deficiency:	C.2.c.1. Does the agency post its procedures for processing requests for Personal Assistance Services on its public website? [see 29 CFR §1614.203(d)(5)(v)] If "yes", please provide the internet address in the comments column.
--	--

The FDA does not post its procedures for processing requests for Personal Assistance Services on its public website. Currently, the PAS procedures are available in the FDA intranet.

Objectives for EEO Plan

Date Initiated	Target Date	Date Modified	Date Completed	Objective Description
07/30/2021	09/30/2021			To include the FDAs PAS Procedures on its public website.

Responsible Officials

Title	Name	Standards Address the Plan?
Director of the Office of Enterprise Management Services	Tiffany Branch	Yes
Team Lead Reasonable Accommodation Office	Robert Thomas	Yes

Planned Activities

Target Date	Planned Activity	Sufficient Staffing & Funding?	Modified Date	Completion Date
09/30/2021	Coordinate with stakeholders to develop and publish PAS Procedures on FDA public website.	Yes		

Accomplishments

Fiscal Year	Accomplishment
2020	Accomplishments will be included in the FY21 MD-715 Report.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.10

Brief Description of Program
Deficiency:

C.2.b.5. Does the agency process all initial accommodation requests, excluding ongoing interpretative services, within the time frame set forth in its reasonable accommodation procedures? [see MD-715, II(C)] If "no", please provide the percentage of timely-processed requests, excluding ongoing interpretative services, in the comments column.

The FDA Reasonable Accommodations Office timely processes reasonable accommodation requests 90% of the time. RAO will continue to offer excellent service to FDA employees and timely process all RA requests.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.11

Brief Description of Program
Deficiency:

C.1.b. Does the agency regularly assess its component and field offices on their efforts to remove barriers from the workplace? [see 29 CFR §1614.102(c)(2)] If "yes", please provide the schedule for conducting audits in the comments section.

See Part H on measure B.4.a.2.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.12

Brief Description of Program Deficiency:	C.2.a. Has the agency established comprehensive anti-harassment policy and procedures that comply with EEOC's enforcement guidance? [see MD-715, II(C); Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (Enforcement Guidance), EEOC No. 915.002, § V.C.1 (June 18, 1999)]
--	--

The agency has not established a comprehensive anti-harassment policy and procedures that comply with EEOC's enforcement guidance

Objectives for EEO Plan

Date Initiated	Target Date	Date Modified	Date Completed	Objective Description
07/30/2020	05/31/2022			The FDA will develop and establish a comprehensive anti-harassment program, policy and procedures that comply with EEOC guidance.

Responsible Officials

Title	Name	Standards Address the Plan?
Deputy Director, Office of Human Capital Management	Shalisha Bazemore	Yes
EEO Director	LaKeisha McClendon	Yes

Planned Activities

Target Date	Planned Activity	Sufficient Staffing & Funding?	Modified Date	Completion Date
09/30/2021	OEEO will partner with OHCM to develop a comprehensive anti-harassment framework, with roles, responsibilities, and program actions FDA must comply with in order to have a fully compliant anti-harassment program.	Yes		
11/30/2021	OHCM will issue the finalized anti-harassment program and policy and will anti-harassment policy and procedures to all employees, in accordance with Part G measure A.2.a.1.	Yes		

Accomplishments

Fiscal Year	Accomplishment
2020	Accomplishments will be included in the FY21 MD-715 Report.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.13

Brief Description of Program
Deficiency:

C.4.c. Does the EEO office have timely access to accurate and complete data (e.g., demographic data for the workforce, applicants, training programs, etc.) required to prepare the MD-715 workforce data tables? [see 29 CFR §1614.601(a)]

The EEO office does not have timely access to accurate and complete data required to prepare the MD-715 data tables. In FY20, the FDA did not have the ability to accurately report on the race/ethnicity composition of its workforce. There was no ability to report on the race/ethnicity of new hires, and race/ethnicity snapshots of the FDA workforce as a whole are no longer accurate due to the significant number of new hires with no available race/ethnicity data. All HHS OpDivs currently face the same issue. The HHS OEEO is the lead in addressing this deficiency. EEOC should defer to the HHS MD-715 Report for planned activities to address this deficiency.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.14

Brief Description of Program Deficiency: D.1.c. Does the agency conduct exit interviews or surveys that include questions on how the agency could improve the recruitment, hiring, inclusion, retention and advancement of individuals with disabilities? [see 29 CFR §1614.203(d)(1)(iii)(C)]

The agency does not conduct exit interviews or surveys that include questions on how the agency could improve the recruitment, hiring, inclusion, retention and advancement of individuals with disabilities.

Objectives for EEO Plan

Date Initiated	Target Date	Date Modified	Date Completed	Objective Description
07/30/2020	09/30/2022			To develop a structure where FDA employees can have an avenue to communicate how the agency can improve the recruitment, hiring inclusion, and advancement of individuals with disabilities.

Responsible Officials

Title	Name	Standards Address the Plan?
Director, Policy, Programs and Accountability	Wendy Hackley	Yes
EEO Director	LaKeisha McClendon	Yes

Planned Activities

Target Date	Planned Activity	Sufficient Staffing & Funding?	Modified Date	Completion Date
10/31/2021	The OEEO will meet with the Office of Talent Solutions (OTS) to determine the best path forward include measures to improve the employment lifecycle of individuals with disabilities.	Yes		

Accomplishments

Fiscal Year	Accomplishment
2020	Accomplishments will be included in the FY21 MD-715 Report.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.15

Brief Description of Program
Deficiency:

D.2.d. Does the agency regularly review the following sources of information to find barriers: complaint/grievance data, exit surveys, employee climate surveys, focus groups, affinity groups, union, program evaluations, anti-harassment program, special emphasis programs, and/or external special interest groups? [see MD-715 Instructions, Sec. I]] If "yes", please identify the data sources in the comments column.

Due to limited staff with experience in barrier analysis, the FDA did not regularly review and conduct a thorough barrier analysis. This deficiency is addressed in Part H on measure B.2.a.4.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.16

Brief Description of Program Deficiency:	E.2.b. When seeking legal sufficiency reviews, does the EEO office have access to sufficient legal resources separate from the agency representative? [see MD-110, Ch. 1(IV)(D)] If "yes", please identify the source/location of the attorney who conducts the legal sufficiency review in the comments column.
--	--

When seeking legal sufficiency reviews, the EEO office does not have access to sufficient legal resources separate from the agency representative.

Objectives for EEO Plan

Date Initiated	Target Date	Date Modified	Date Completed	Objective Description
07/30/2020	09/30/2022			For the OEEO to have access to sufficient legal resources separate from the agency representative.

Responsible Officials

Title	Name	Standards Address the Plan?
EEO Director	LaKeisha McClendon	Yes

Planned Activities

Target Date	Planned Activity	Sufficient Staffing & Funding?	Modified Date	Completion Date
09/30/2022	FDA OEEO will seek sufficient legal resources in OEEO to provide legal sufficiency reviews, and to help the office develop and maintain legally compliant programming.	Yes		

Accomplishments

Fiscal Year	Accomplishment
2020	<p>It is important for the EEO Director to be provided with sufficient legal resources (either directly or through contracts) so that the legal analyses necessary for reaching final agency decisions can be made within the autonomous EEO office.</p> <p>Because FDA, OEEO does not currently have an internal process for legal sufficiency review, at a minimum, the OEEO Office, has been able to use the recommended resources via the Department HHS and OPDivs without involving the agency representative in EEO complaints or review of EEO matters. The Department HHS and the OPDivs legal sufficiency reviews in the EEO process, involves legal analysis made by the FDA, OEEO office during the processing of EEO complaints, such as acceptance/dismissal of complaints, legal theories utilized by the EEO office during investigations, and legal determinations made in final agency actions.</p> <p>In the future, FDA OEEO will seek sufficient legal resources in OEEO to provide legal sufficiency reviews, and to help the office develop and maintain legally compliant programming. The optimal situation is for FDA, OEEO office to have sufficient internal legal resources. However, when necessary and requested by the FDA, OEEO office, legal sufficiency reviews conducted outside the EEO office most likely will be handled by individuals that are separate and apart from the agency's defensive function. Moreover, agency representatives are not involved in the review of Final Agency Decisions.</p>

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Attain Essential Elements

PART H.17

Brief Description of Program
Deficiency:

F.3.b. Does the agency timely post on its public webpage its quarterly No FEAR Act data? [see 29 CFR §1614.703(d)]

The FDA doesn't post its quarterly No FEAR Act data on its public webpage.

Objectives for EEO Plan

Date Initiated	Target Date	Date Modified	Date Completed	Objective Description
07/30/2020	12/31/2021			For the OEEO to timely post on FDAs public webpage the quarterly No FEAR Act data.

Responsible Officials

Title	Name	Standards Address the Plan?
EEO Director	LaKeisha McClendon	Yes

Planned Activities

Target Date	Planned Activity	Sufficient Staffing & Funding?	Modified Date	Completion Date
12/31/2021	The OEEO Compliance staff will update FDAs current No FEAR Act public website with data from missing years (FY19, FY20, FY21) and will develop a process to timely post No FEAR Act data on a quarterly basis.	Yes		

Accomplishments

Fiscal Year	Accomplishment
2020	Accomplishments will be included in the FY21 MD-715 Report.

HHS Food and Drug Administration

For period covering October 1, 2019 to September 30, 2020

Plan to Eliminate Identified Barriers

MD-715 – Part J
Special Program Plan
for the Recruitment, Hiring, Advancement, and
Retention of Persons with Disabilities

To capture agencies' affirmative action plan for persons with disabilities (PWD) and persons with targeted disabilities (PWTD), EEOC regulations (29 C.F.R. § 1614.203(e)) and MD-715 require agencies to describe how their affirmative action plan will improve the recruitment, hiring, advancement, and retention of applicants and employees with disabilities.

Section I: Efforts to Reach Regulatory Goals

EEOC regulations (29 CFR § 1614.203(d)(7)) require agencies to establish specific numerical goals for increasing the participation of persons with disabilities and persons with targeted disabilities in the federal government

1. Using the goal of 12% as the benchmark, does your agency have a trigger involving PWD by grade level cluster in the permanent workforce? If “yes”, describe the trigger(s) in the text box.

- | | | |
|-------------------------------|--------|----|
| a.Cluster GS-1 to GS-10 (PWD) | Answer | No |
| b.Cluster GS-11 to SES (PWD) | Answer | No |

The FDA cannot conclusively state whether in FY20 there were triggers in the above GS clusters. FY20 workforce data had significant quality issues, thus we could not conduct a thorough analysis of it. However, past data reveals that the FDA has met the benchmark of 12% for PWD in cluster GS-1 to GS-10, but it has not met the benchmark of 12% for PWD in grades GS-11 to SES.

*For GS employees, please use two clusters: GS-1 to GS-10 and GS-11 to SES, as set forth in 29 C.F.R. § 1614.203(d) (7). For all other pay plans, please use the approximate grade clusters that are above or below GS-11 Step 1 in the Washington, DC metropolitan region.

2. Using the goal of 2% as the benchmark, does your agency have a trigger involving PWTD by grade level cluster in the permanent workforce? If “yes”, describe the trigger(s) in the text box.

- | | | |
|--------------------------------|--------|-----|
| a.Cluster GS-1 to GS-10 (PWTD) | Answer | No |
| b.Cluster GS-11 to SES (PWTD) | Answer | Yes |

The FDA cannot conclusively state whether in FY20 there were triggers in the above GS clusters. FY20 workforce data had significant quality issues, thus we could not conduct a thorough analysis of it. However, past data reveals that the FDA has met the benchmark of 12% for PWTD in cluster GS-1 to GS-10, but it has not met the benchmark of 12% for PWTD in grades GS-11 to SES.

3. Describe how the agency has communicated the numerical goals to the hiring managers and/or recruiters.

The FDA does not have a consistent method of communicating the 2% and 12% numerical goals to hiring managers and recruiters. This deficiency is a priority for the OEEEO and key stakeholders and will be addressed in future strategic planning, particularly as the OEEEO develops DEIA and EEO Strategic Plans, slated to be completed at the beginning of FY22.

Section II: Model Disability Program

Pursuant to 29 C.F.R. § 1614.203(d)(1), agencies must ensure sufficient staff, training and resources to recruit and hire persons with disabilities and persons with targeted disabilities, administer the reasonable accommodation program and special emphasis program, and oversee any other disability hiring and advancement program the agency has in place.

A. PLAN TO PROVIDE SUFFICIENT & COMPETENT STAFFING FOR THE DISABILITY PROGRAM

1. Has the agency designated sufficient qualified personnel to implement its disability program during the reporting period? If “no”, describe the agency’s plan to improve the staffing for the upcoming year.

Answer No

As of September 2020, the Reasonable Accommodations Office (RAO) staff included seven (7) FTEs, to include two (2) full time Interpreting Services staff. The office is projected to add one additional FTE in FY21. The staff is qualified to implement the reasonable accommodations program at the FDA. In FY20 OEE0 experienced a high-level of employee attrition due to retirements and resignations. In FY20 OEE0 experienced a high-level of employee attrition due to retirements and resignations. Currently, the FDA does not have a full time Disability Program Manager tasked with managing the disability program. We recognize that a Disability Program Manager position is mandated and established by law. In FY21 OEE0 will recruit for a Diversity, Equity, and Inclusion Program Manager who will be tasked with monitoring elements of the disability program. In FY22-23 the OEE0 plans to fill several vacancies, which might include the DPM role, pending budget availability. During FY21 The OEE0 will continue its collaboration with the RAO team for reasonable accommodations and the Office of Talent Solutions (OTS) Policy, Programs and Accountability Staff (PAS) regarding the disability program.

2. Identify all staff responsible for implementing the agency's disability employment program by the office, staff employment status, and responsible official.

Disability Program Task	# of FTE Staff By Employment Status			Responsible Official (Name, Title, Office Email)
	Full Time	Part Time	Collateral Duty	
Processing applications from PWD and PWTD	4	0	5	Nolan L. Jones, HR Specialist (Special Placement Programs Coordinator), OTS, Nolan.Jones@fda.hhs.gov Jessica Romero, HR Specialist (Schedule A Program Coordinator), OTS, Jessica.Romero@fda.hhs.gov Patricia Lawson, HR Specialist (Priority Placement Programs Coordinator), OTS, Patricia.Lawson@fda.hhs.gov
Processing reasonable accommodation requests from applicants and employees	7	2	0	Tiffany Branch, Director, OEMS, Tiffany.Branch@fda.hhs.gov Anaury Angeles; EEO Specialist, OEMS; Anaury.Angeles@fda.hhs.gov
Answering questions from the public about hiring authorities that take disability into account	4	0	5	OTS Special Placement Program Coordinators (from list above), OTS Policy Staff (5 employees), and all OTS Staff (HR Specialists) who posts job announcements.
Section 508 Compliance	1	0	0	Rita Harrison IT Specialist
Architectural Barriers Act Compliance	0	0	0	
Special Emphasis Program for PWD and PWTD	0	0	0	

3. Has the agency provided disability program staff with sufficient training to carry out their responsibilities during the reporting period? If "yes", describe the training that disability program staff have received. If "no", describe the training planned for the upcoming year.

Answer Yes

All reasonable accommodation staff members received a minimum of eight hours of reasonable accommodation related training. The RAO staff completed the following trainings: - National Employment Law Institute (NELI) ADA Workshop - Gilbert and Kaplan: Nuts and Bolts of Disability Law and Reasonable Accommodation To carry out its responsibilities regarding the disability program, the OTS Special Placement Program Coordinators will receive training to provide support and assistance to the disability program.

B. PLAN TO ENSURE SUFFICIENT FUNDING FOR THE DISABILITY PROGRAM

Has the agency provided sufficient funding and other resources to successfully implement the disability program during the reporting period? If "no", describe the agency's plan to ensure all aspects of the disability program have sufficient funding and other resources

Answer Yes

Section III: Plan to Recruit and Hire Individuals with Disabilities

Pursuant to 29 C.F.R. §1614.203(d)(1)(i) and (ii), agencies must establish a plan to increase the recruitment and hiring of individuals with disabilities. The questions below are designed to identify outcomes of the agency's recruitment program plan for PWD and PWTD

A. PLAN TO IDENTIFY JOB APPLICATIONS WITH DISABILITIES

1. Describe the programs and resources the agency uses to identify job applicants with disabilities, including individuals with targeted disabilities.

FDA utilized a variety of recruitment strategies (Virtual Job fairs, JOAs include eligibility question for PWD/PWTD, Wounded Warriors Program, etc.) designed to increase the number of qualified applicants with disabilities and applicants with targeted disabilities, including veterans with disabilities. The FDA continuously utilized the USAStaffing Applicant Talent System and the FDA Resume Repository to identify job applicants with disabilities/targeted disabilities. The FDA Resume Repository is a SharePoint tool utilized by FDA Managers and Supervisors and Human Resources Staff for the purposes of streamlining the hiring process for Schedule A applicants and Veteran hires into the Federal workforce. FDA continues to maintain a database with resumes of PWD and PWTD. Hiring managers are strongly encouraged to review those applications for Schedule A hiring considerations prior to posting job opportunity announcements (JOAs).

2. Pursuant to 29 C.F.R. §1614.203(a)(3), describe the agency's use of hiring authorities that take disability into account (e.g., Schedule A) to recruit PWD and PWTD for positions in the permanent workforce

In addition to the Schedule A (5 C.F.R. 213.3102(u) hiring authority, the FDA uses other hiring authorities under Title 5, Title 21, and Title 42 to recruit PWD and PWTD to positions within its permanent workforce.

3. When individuals apply for a position under a hiring authority that takes disability into account (e.g., Schedule A), explain how the agency (1) determines if the individual is eligible for appointment under such authority; and, (2) forwards the individual's application to the relevant hiring officials with an explanation of how and when the individual may be appointed.

FDA requests from the applicant documentation of eligibility for employment under Schedule A that can be obtained from a licensed medical professional (e.g., a physician or other medical professional certified by a state, the District of Columbia, or a U.S. territory to practice medicine); a licensed vocational rehabilitation specialist (i.e., state or private); or any Federal agency, state agency, or agency of the District of Columbia or a U.S. territory that issues or provides disability benefits. The Schedule A Program Coordinator (SAPC) receives a request to hire Schedule A applicant package from the OTS HR Specialist to include the Schedule A letter as cited above. The letter is then, separated from the package, reviewed for content/format and then forwarded to the Healthcare Provider for disability verification using the FDA Schedule A Verification form (The FDA Special Placement Program Staff created a template verification form letter that was designed to streamline the verification process. The form is sent along with the applicant's Schedule A letter to the medical/service provider to verify the certification letter they signed on behalf of their patient/client). Once the information has been verified (validated) by a licensed medical professional or a licensed vocational rehabilitation specialist, they will sign the FDA Schedule A Verification form and send it back to the SAPC. The SAPC will then inform the OTS HR Specialist of the results and send back the resume/application/verified Schedule A letter to document the recruitment package. The OTS HR Specialist works with the FDA Manager/Supervisor to issue the noncompetitive certificate of eligibility, document the selection, and finalize the job offer/onboarding process. If the PWD and PWTD candidate is selected for the position, FDA encourages the manager to convert the applicant from noncompetitive to career conditional after two years. The Office of Talent Solutions launched in FY17 a searchable Schedule A candidate database for hiring managers and continues to maintain it on the OHR's SharePoint site. This database is a searchable applicant database for Disabled Veterans, Schedule A, and Veterans' Recruitment Appointment (VRA). Managers have access to this database and are encouraged to hire these candidates. In FY19, the OTS officially launched the FDA Resume Repository and began providing training regarding the Special Placement Programs and utilization of the resume repository as a hiring tool to all FDA managers and supervisors. Additionally, the OTS staff was trained on this hiring tool.

4. Has the agency provided training to all hiring managers on the use of hiring authorities that take disability into account (e.g., Schedule A)? If "yes", describe the type(s) of training and frequency. If "no", describe the agency's plan to provide this training.

Answer Yes

FDA conducted trainings for all hiring managers including those that are mandatory by HHS/OPM, and other optional trainings, at least annually. FDA also maintains and updates a Resume Repository of individuals seeking employment for any of the covered hiring authorities. FDA managers and supervisors are provided a demonstration on how to use the repository as part of their training.

B. PLAN TO ESTABLISH CONTACTS WITH DISABILITY EMPLOYMENT ORGANIZATIONS

Describe the agency's efforts to establish and maintain contacts with organizations that assist PWD, including PWTD, in securing and maintaining employment.

FDA has established MOUs with several minority serving institutions and organizations, to assist with hiring PWD and PWTD for positions within the agency. This is in addition to the current agreements that we have with state vocational rehabilitation agencies and with the US Department of Labor. There is a Career and Student Profile System to recruit staff for PWD and PWTD for internships and career opportunities within the agency. We also utilized the Workforce Recruitment Program (WRP). WRP is a recruitment and referral program that connects federal and private-sector employers nationwide with highly motivated college students and recent graduates with disabilities who are eager to demonstrate their abilities in the workplace through summer or permanent jobs. Additionally, the FDA's Advisory Committee for Employees with Disabilities (ACED) is an advisory board chartered by the Commissioner, FDA to provide advice on policies, issues, and concerns impacting employees with disabilities within FDA and those seeking employment by the agency. The ACED is a communication channel between FDA employees and management.

C. PROGRESSION TOWARDS GOALS (RECRUITMENT AND HIRING)

1. Using the goals of 12% for PWD and 2% for PWTD as the benchmarks, do triggers exist for PWD and/or PWTD among the new hires in the permanent workforce? If "yes", please describe the triggers below.

- a. New Hires for Permanent Workforce (PWD) Answer Yes
- b. New Hires for Permanent Workforce (PWTD) Answer Yes

Among New Hires using the B tables in FY19, (GS-1 to GS-11), The selection rate for PWDs was 5.91% and for PWTDs it was 1.07%. For GS-13 to SES, PWDs was 4.57% and PWTDs was 0.81%. Using the Applicant Flow Data (AFD) Yes, triggers exist for PWD and PWTD among the new hires in the permanent workforce. The participation rate of PWDs is only 2.8%, which is 9.3% below the 12% benchmark. The participation rate of PWTD is 0.9% which is 1.1% below the benchmark of 2%. Separations for PWD and PWTD also exceed new hires in FY19, indicating that recruitment goals are not being met in addition to there being a potential retention barrier. In FY19 14 PWTD separated while AFD reflects only 1 new EOD(Entrance On Duty) from this group. A similar trend is seen in PWD where a total of 61 PWD separated from the Agency while AFD reflects only 3 new EODs for this group.

2. Using the qualified applicant pool as the benchmark, do triggers exist for PWD and/or PWTD among the new hires for any of the mission-critical occupations (MCO)? If "yes", please describe the triggers below. Select "n/a" if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. New Hires for MCO (PWD) Answer Yes
- b. New Hires for MCO (PWTD) Answer Yes

Using the Applicant Flow Data (AFD) report, triggers exist both for PWD and PWTD . Triggers exist for all MCOs with the exception of the 0301 series PWD group. PWOD IR for all recruited MCOs was a positive value, where the IR for PWD and PWTD was typically 0%. A single PWD selection was made in the 0301 series informing an inclusion rate of 1.1% for PWD. This exceeds the inclusion rate of 0.9% for PWOD. Therefore, a trigger does not exist for the 0301 MCO for PWD. There is a trigger in the case of PWTD for this group. In the case of MCOs 0110, 0401, 0403, 0405, 0601, 0696, 1320 and 1529, the original applicant pool sizes were insufficient to inform a full FTE when applying the PWOD IR. For example, the applicant pool for series 0601 PWD is 20; if the 0601 PWOD IR is applied to this pool size, the product is less than 1 FTE (.003*20=0.06 FTE). This points to a possible barrier where recruitment approach is concerned. Mitigation should focus on finding ways to increase the applicant pool size.

3. Using the relevant applicant pool as the benchmark, do triggers exist for PWD and/or PWTD among the qualified internal applicants for any of the mission-critical occupations (MCO)? If "yes", please describe the triggers below. Select "n/a" if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. Qualified Applicants for MCO (PWD) Answer Yes
- b. Qualified Applicants for MCO (PWTD) Answer Yes

Using the Applicant Flow Data (AFD) report, YES. Triggers exist for all MCOs with the exception of the 0110, 0343, 0696, and 1529 series for the PWD group; and series 0696 for PWTD. In each of these cases, the IR for PWD/ PWTD exceeded the IR for PWOD. In all other cases, PWOD IR for all recruited MCOs was a positive value, where the IR for PWD and PWTD was typically 0%. The 0301 and 0343 MCOs were less severe cases in that one or more PWD selection was made from these groups to inform a positive inclusion rate higher than 0%. AFD signals a disparity when these inclusion rates are compared to the same for PWOD. For example, the 0343 MCO series has an inclusion rate of 3.8% for PWTD compared to the PWOD IR for the same group which is 4.3%. This is a relatively small gap (.5%) which can be closed more easily than the cases of 0% IR MCOs. The 0301 MCO series also reflects a positive IR at 3% for PWTD and 4% for PWD, compared to the 4.3% IR for PWOD. In the case of MCOs 0110, 0401, 0403, 0405, 0701, 1320, and 1529, the original applicant pool sizes were insufficient to inform a full FTE when applying the PWOD IR. For example, the applicant pool for series 0403 is zero providing no basis to apply an IR. This points to a possible barrier where recruitment approach is concerned. Mitigation should focus on finding ways to increase the applicant pool size. In the case of the 1529 MCO series, although the applicant pool for PWD is small (7 qualified), if the PWOD IR for the same series is applied to this pool size, one would expect 2-3 selections to be made from this group versus the single selection made, based on the PWOD IR of 45% for this series. This points to a trigger for PWD Selection IR for the 1529 MCO series.

4. Using the qualified applicant pool as the benchmark, do triggers exist for PWD and/or PWTD among employees promoted to any of the mission-critical occupations (MCO)? If "yes", please describe the triggers below. Select "n/a" if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. Promotions for MCO (PWD) Answer No
- b. Promotions for MCO (PWTD) Answer Yes

a. FDA's overall rate for PWDs was 5.64% in FY19. Of the 853 employees selected for internal promotions in major occupations, 6.57% were PWDs. b. FDA's overall rate for PWTDs was 1.04% in FY19. Of the 853 employees selected for internal promotions in major occupations, 0.59% were PWTDs. Data from Tables B-1 and B-9.

Section IV: Plan to Ensure Advancement Opportunities for Employees with Disabilities

Pursuant to 29 C.F.R. §1614.203(d)(1)(iii), agencies are required to provide sufficient advancement opportunities for employees with disabilities. Such activities might include specialized training and mentoring programs, career development opportunities, awards programs, promotions, and similar programs that address advancement. In this section, agencies should identify, and provide data on programs designed to ensure advancement opportunities for employees with disabilities.

A. ADVANCEMENT PROGRAM PLAN

Describe the agency's plan to ensure PWD, including PWTD, have sufficient opportunities for advancement.

FDA plans to provide opportunities and advancement for PWD and PWTD. The OEEO will work with the Office of Talent Solutions (OTS) and the Office of Human Capital Management (OHCM) to identify opportunities for training/ mentoring, career development, awards, promotions, and similar programs for PWD and PWTD.

B. CAREER DEVELOPMENT OPPORTUNITES

1. Please describe the career development opportunities that the agency provides to its employees.

FDA has several career development programs at the center level however they do not track if participants are PWD or PWTD. The agency is looking at centralizing all of the career development opportunities within the centers to provide that information on future MD 715 reports.

2. In the table below, please provide the data for career development opportunities that require competition and/or supervisory recommendation/approval to participate.

Career Development Opportunities	Total Participants		PWD		PWTD	
	Applicants (#)	Selectees (#)	Applicants (#)	Selectees (#)	Applicants (#)	Selectees (#)
Detail Programs	N/A	N/A	N/A	N/A	N/A	N/A
Internship Programs	N/A		N/A	N/A	N/A	N/A
Fellowship Programs	N/A		N/A	N/A	N/A	N/A
Mentoring Programs	N/A		N/A	N/A	N/A	N/A
Coaching Programs	N/A		N/A	N/A	N/A	N/A
Training Programs	N/A		N/A	N/A	N/A	N/A
Other Career Development Programs	N/A		N/A	N/A	N/A	N/A

3. Do triggers exist for PWD among the applicants and/or selectees for any of the career development programs? (The appropriate benchmarks are the relevant applicant pool for the applicants and the applicant pool for selectees.) If “yes”, describe the trigger(s) in the text box. Select “n/a” if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. Applicants (PWD) Answer N/A
b. Selections (PWD) Answer N/A

FDA does not have data for PWD or PWTD applicants for fellowship, career development, coaching, training, or detail programs. We are looking at capturing this information in future reports.

4. Do triggers exist for PWTD among the applicants and/or selectees for any of the career development programs? (The appropriate benchmarks are the relevant applicant pool for the applicants and the applicant pool for selectees.) If “yes”, describe the trigger(s) in the text box. Select “n/a” if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. Applicants (PWTD) Answer N/A
b. Selections (PWTD) Answer N/A

Currently, FDA does not collect any Disability information on applicants or selectees participating in Career Development Programs.

C. AWARDS

1. Using the inclusion rate as the benchmark, does your agency have a trigger involving PWD and/or PWTD for any level of the time-off awards, bonuses, or other incentives? If “yes”, please describe the trigger(s) in the text box.

- a. Awards, Bonuses, & Incentives (PWD) Answer No
b. Awards, Bonuses, & Incentives (PWTD) Answer No

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether there are triggers for PWD and/or PWTD for QSIs and pay increases. The last available workforce analysis is from FY19, where FDA identified a possible trigger in time-off awards. In FY21, the FDA OEEO will double-check this data once it has access to reliable workforce data.

2. Using the inclusion rate as the benchmark, does your agency have a trigger involving PWD and/or PWTD for quality step increases or performance-based pay increases? If “yes”, please describe the trigger(s) in the text box.

- a. Pay Increases (PWD) Answer No
b. Pay Increases (PWTD) Answer No

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether there are triggers for PWD and/or PWTD for QSIs and pay increases. The last available workforce analysis is from FY19, where FDA identified a possible trigger in pay increases. In FY21, the FDA OEEO will double-check this data once it has access to reliable workforce data.

3. If the agency has other types of employee recognition programs, are PWD and/or PWTD recognized disproportionately less than employees without disabilities? (The appropriate benchmark is the inclusion rate.) If “yes”, describe the employee recognition program and relevant data in the text box.

- a. Other Types of Recognition (PWD) Answer N/A
b. Other Types of Recognition (PWTD) Answer N/A

The only awards that are calculated are the time-off awards, QSIs, Cash Awards and Performance-Based Pay Increases. If there are other types of recognition that the agency is giving to PWD and PWTD is is not currently being tracked. FDA is looking at ways to capture other types of recognition given to PWD and PWTD.

D. PROMOTIONS

1. Does your agency have a trigger involving PWD among the qualified internal applicants and/or selectees for promotions to the senior grade levels? (The appropriate benchmarks are the relevant applicant pool for qualified internal applicants and the qualified applicant pool for selectees.) For non-GS pay plans, please use the approximate senior grade levels. If “yes”, describe the trigger(s) in the text box. Select “n/a” if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. SES
 - i. Qualified Internal Applicants (PWD) Answer N/A
 - ii. Internal Selections (PWD) Answer N/A
- b. Grade GS-15
 - i. Qualified Internal Applicants (PWD) Answer N/A
 - ii. Internal Selections (PWD) Answer N/A
- c. Grade GS-14
 - i. Qualified Internal Applicants (PWD) Answer N/A
 - ii. Internal Selections (PWD) Answer N/A
- d. Grade GS-13
 - i. Qualified Internal Applicants (PWD) Answer N/A
 - ii. Internal Selections (PWD) Answer N/A

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether there are triggers for PWD and/or PWTD for promotions to senior grade levels. FDA OEEO will analyze this information once it has access to reliable, accurate workforce data.

2. Does your agency have a trigger involving PWTD among the qualified internal applicants and/or selectees for promotions to the senior grade levels? (The appropriate benchmarks are the relevant applicant pool for qualified internal applicants and the qualified applicant pool for selectees.) For non-GS pay plans, please use the approximate senior grade levels. If “yes”, describe the trigger(s) in the text box. Select “n/a” if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. SES
 - i. Qualified Internal Applicants (PWTD) Answer N/A
 - ii. Internal Selections (PWTD) Answer N/A
- b. Grade GS-15
 - i. Qualified Internal Applicants (PWTD) Answer N/A
 - ii. Internal Selections (PWTD) Answer N/A
- c. Grade GS-14
 - i. Qualified Internal Applicants (PWTD) Answer N/A
 - ii. Internal Selections (PWTD) Answer N/A
- d. Grade GS-13
 - i. Qualified Internal Applicants (PWTD) Answer N/A
 - ii. Internal Selections (PWTD) Answer N/A

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether there are triggers for PWD and/or PWTD for internal promotions to senior grade levels. FDA OEEO will analyze this information once it has access to reliable, accurate workforce data.

3. Using the qualified applicant pool as the benchmark, does your agency have a trigger involving PWD among the new hires to the senior grade levels? For non-GS pay plans, please use the approximate senior grade levels. If “yes”, describe the trigger(s) in the text box. Select “n/a” if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. New Hires to SES (PWD) Answer N/A
- b. New Hires to GS-15 (PWD) Answer N/A

- c. New Hires to GS-14 (PWD) Answer N/A
- d. New Hires to GS-13 (PWD) Answer N/A

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether there are triggers for PWD and/or PWTD for new hires. FDA OEEO will analyze this information once it has access to reliable, accurate workforce data.

4. Using the qualified applicant pool as the benchmark, does your agency have a trigger involving PWTD among the new hires to the senior grade levels? For non-GS pay plans, please use the approximate senior grade levels. If “yes”, describe the trigger(s) in the text box. Select “n/a” if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. New Hires to SES (PWTD) Answer N/A
- b. New Hires to GS-15 (PWTD) Answer Yes
- c. New Hires to GS-14 (PWTD) Answer Yes
- d. New Hires to GS-13 (PWTD) Answer Yes

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether there are triggers for PWD and/or PWTD for new hires to senior grade levels. FDA OEEO will analyze this information once it has access to reliable, accurate workforce data.

5. Does your agency have a trigger involving PWD among the qualified internal applicants and/or selectees for promotions to supervisory positions? (The appropriate benchmarks are the relevant applicant pool for qualified internal applicants and the qualified applicant pool for selectees.) If “yes”, describe the trigger(s) in the text box. Select “n/a” if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. Executives
 - i. Qualified Internal Applicants (PWD) Answer N/A
 - ii. Internal Selections (PWD) Answer N/A
- b. Managers
 - i. Qualified Internal Applicants (PWD) Answer N/A
 - ii. Internal Selections (PWD) Answer N/A
- c. Supervisors
 - i. Qualified Internal Applicants (PWD) Answer N/A
 - ii. Internal Selections (PWD) Answer N/A

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether there are triggers for PWD and/or PWTD for promotions to supervisory positions. FDA OEEO will analyze this information once it has access to reliable, accurate workforce data.

6. Does your agency have a trigger involving PWTD among the qualified internal applicants and/or selectees for promotions to supervisory positions? (The appropriate benchmarks are the relevant applicant pool for qualified internal applicants and the qualified applicant pool for selectees.) If “yes”, describe the trigger(s) in the text box. Select “n/a” if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. Executives
 - i. Qualified Internal Applicants (PWTD) Answer N/A
 - ii. Internal Selections (PWTD) Answer N/A
- b. Managers
 - i. Qualified Internal Applicants (PWTD) Answer N/A
 - ii. Internal Selections (PWTD) Answer N/A
- c. Supervisors
 - i. Qualified Internal Applicants (PWTD) Answer N/A
 - ii. Internal Selections (PWTD) Answer N/A

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether there are triggers for PWD and/or PWTD for internal promotions to supervisory positions. FDA OEEO will analyze this information once it has access to reliable, accurate workforce data.

7. Using the qualified applicant pool as the benchmark, does your agency have a trigger involving PWD among the selectees for new hires to supervisory positions? If “yes”, describe the trigger(s) in the text box. Select “n/a” if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. New Hires for Executives (PWD) Answer N/A
- b. New Hires for Managers (PWD) Answer N/A
- c. New Hires for Supervisors (PWD) Answer N/A

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether there are triggers for PWD and/or PWTd for new hires to supervisory positions. FDA OEEo will analyze this information once it has access to reliable, accurate workforce data.

8. Using the qualified applicant pool as the benchmark, does your agency have a trigger involving PWTd among the selectees for new hires to supervisory positions? If “yes”, describe the trigger(s) in the text box. Select “n/a” if the applicant data is not available for your agency, and describe your plan to provide the data in the text box.

- a. New Hires for Executives (PWTd) Answer N/A
- b. New Hires for Managers (PWTd) Answer N/A
- c. New Hires for Supervisors (PWTd) Answer N/A

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether there are triggers for PWD and/or PWTd for new hires to supervisory positions. FDA OEEo will analyze this information once it has access to reliable, accurate workforce data.

Section V: Plan to Improve Retention of Persons with Disabilities

To be model employer for persons with disabilities, agencies must have policies and programs in place to retain employees with disabilities. In this section, agencies should: (1) analyze workforce separation data to identify barriers retaining employees with disabilities; (2) describe efforts to ensure accessibility of technology and facilities; and (3) provide information on the reasonable accommodation program and workplace assistance services.

A. VOLUNTARY AND INVOLUNTARY SEPARATIONS

1. In this reporting period, did the agency convert all eligible Schedule A employees with a disability into the competitive service after two years of satisfactory service (5 CFR § 213.3102(u)(6)(i))? If “no”, please explain why the agency did not convert all eligible Schedule A employees.

Answer No

The OEEo is currently working with the Policy, Programs and Accountability team to further investigate if all of the eligible Schedule A employees with a disability have been converted into a competitive service position after two years of satisfactory service. Information regarding this process will be included on future reports.

2. Using the inclusion rate as the benchmark, did the percentage of PWD among voluntary and involuntary separations exceed that of persons without disabilities? If “yes”, describe the trigger below.

- a. Voluntary Separations (PWD) Answer No
- b. Involuntary Separations (PWD) Answer No

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether the percentage of PWD among voluntary and involuntary separations exceed that of persons without disabilities. FDA OEEo will analyze this information once it has access to reliable, accurate workforce data.

3. Using the inclusion rate as the benchmark, did the percentage of PWTd among voluntary and involuntary separations exceed that of persons without targeted disabilities? If “yes”, describe the trigger below.

- a. Voluntary Separations (PWTd) Answer No
- b. Involuntary Separations (PWTd) Answer No

Given significant data quality issues with the FY20 workforce data, the FDA cannot conclusively state whether the percentage of PWTd among voluntary and involuntary separations exceed that of persons without targeted disabilities. FDA OEEo will analyze this information once it has access to reliable, accurate workforce data.

4. If a trigger exists involving the separation rate of PWD and/or PWTD, please explain why they left the agency using exit interview results and other data sources.

N/A

B. ACCESSIBILITY OF TECHNOLOGY AND FACILITIES

Pursuant to 29 CFR §1614.203(d)(4), federal agencies are required to inform applicants and employees of their rights under Section 508 of the Rehabilitation Act of 1973 (29 U.S.C. § 794(b), concerning the accessibility of agency technology, and the Architectural Barriers Act of 1968 (42 U.S.C. § 4151-4157), concerning the accessibility of agency facilities. In addition, agencies are required to inform individuals where to file complaints if other agencies are responsible for a violation.

1. Please provide the internet address on the agency's public website for its notice explaining employees' and applicants' rights under Section 508 of the Rehabilitation Act, including a description of how to file a complaint.

The FDA does not have a notice explaining applicants rights under Section 508 of the Rehab Act on its public website, however, there is access to a description of how to file a complaint. You may access this site here: <https://www.fda.gov/about-fda/equal-employment-fda/fda-eeo-compliance-filing-discrimination-complaint>.

2. Please provide the internet address on the agency's public website for its notice explaining employees' and applicants' rights under the Architectural Barriers Act, including a description of how to file a complaint.

The agency does not currently have an Architectural Barriers Act located on its public website. FDA Leadership will be addressing this deficiency as part of the evaluation/assessment of EEO and the development of a gap analysis and EEO strategic plan.

3. Describe any programs, policies, or practices that the agency has undertaken, or plans on undertaking over the next fiscal year, designed to improve accessibility of agency facilities and/or technology.

The FDA, along with the Department of Health and Human Services, has a commitment to the accessibility and functionality of the web site content for all Americans. This commitment takes the form of a constantly evolving service of improving accessibility for our community of users. As the technology of the internet evolves, the FDA shares with its users the ongoing improvement of FDA websites and its services. For individuals with disabilities who are having problems accessing information on the FDA web site using assistive technology, they are encouraged to contact the FDA 508 Coordinator (FDA508Coordinator@fda.hhs.gov). The FDA is committed to making content accessible to everyone. For individuals submitting presentations or documents to the FDA, guidance for formatting documents properly and assisting FDA efforts in equivalent access and transparency is provided. At this time, virtually all FDA information is being made accessible via screen readers and other accessibility tools with the exception of some pre-2001 information, dockets, and some technical documents, which may not be available in accessible formats.

C. REASONABLE ACCOMMODATION PROGRAM

Pursuant to 29 C.F.R. § 1614.203(d)(3), agencies must adopt, post on their public website, and make available to all job applicants and employees, reasonable accommodation procedures.

1. Please provide the average time frame for processing initial requests for reasonable accommodations during the reporting period. (Please do not include previously approved requests with repetitive accommodations, such as interpreting services.)

The average time for processing reasonable accommodation requests during FY20 was 58.3 days. The Agency established timeframe for processing reasonable accommodation requests is 60 days. Processing procedures, as well as timeframes, are currently under review and projected to be revised during FY21 to emulate other federal agencies best practices.

2. Describe the effectiveness of the policies, procedures, or practices to implement the agency's reasonable accommodation program. Some examples of an effective program include timely processing requests, timely providing approved accommodations, conducting training for managers and supervisors, and monitoring accommodation requests for trends.

The Agency has revised tracking procedures and employed resources to accurately capture request events. System and procedural changes, and one additional staff member, assisted with a 35% decrease in recorded processing days from FY19 (FY20 - 58.3 days from FY19 - 89.3 days). Adjustment of tracking processes allowed a more accurate view of request status, enabling subsequent prompt follow-up from the RAO to ensure timely determination and implementation of accommodation requests, as applicable. Immediately following the onset of the COVID-19 pandemic, the Agency maintained a maximum telework posture and trainings by the RAO were conducted virtually during FY20. RAO has developed and implemented presentations for the Agency's bi-weekly New Employee Orientation. During FY20 around 900 supervisors and managers were provided with one to two hours of reasonable accommodation training through such venues as quarterly Office of Regulatory Affairs (ORA) Supervisory Personnel Practices for new supervisors and supervisory refreshers, in addition to FDA University Supervisory 101 and 201. Throughout FY20, the RAO continued to coordinate training offerings with FDA Centers/Offices for managers and supervisors on an ad-hoc basis, including executive and senior leadership from two FDA Centers. During FY20, the RAO continued to provide Executive Officers and senior officials of the agency with monthly status/trend reports of FDA and Center/Office specific reasonable accommodation requests. After a hiatus due to early COVID-19 response, the reasonable accommodation workgroup established in FY19 resumed reviewing and revising the FDA reasonable accommodation policies and procedures during FY20. A draft policy is currently in its final stages of internal approval.

D. PERSONAL ASSISTANCE SERVICES ALLOWING EMPLOYEES TO PARTICIPATE IN THE WORKPLACE

Pursuant to 29 CFR §1614.203(d)(5), federal agencies, as an aspect of affirmative action, are required to provide personal assistance services (PAS) to employees who need them because of a targeted disability, unless doing so would impose an undue hardship on the agency.

Describe the effectiveness of the policies, procedures, or practices to implement the PAS requirement. Some examples of an effective program include timely processing requests for PAS, timely providing approved services, conducting training for managers and supervisors, and monitoring PAS requests for trends.

Personal Assistance Services (PAS) for FDA employees is currently provided by the DHHS through the RA program office at EEOCO.Accommodations@hhs.gov, or at (202) 619-1564.

Section VI: EEO Complaint and Findings Data

A. EEO COMPLAINT DATA INVOLVING HARASSMENT

1. During the last fiscal year, did a higher percentage of PWD file a formal EEO complaint alleging harassment, as compared to the government-wide average?

Answer No

2. During the last fiscal year, did any complaints alleging harassment based on disability status result in a finding of discrimination or a settlement agreement?

Answer Yes

3. If the agency had one or more findings of discrimination alleging harassment based on disability status during the last fiscal year, please describe the corrective measures taken by the agency.

Settlement agreements terms included attorney's fees and lump sum payments to complainants.

B. EEO COMPLAINT DATA INVOLVING REASONABLE ACCOMMODATION

1. During the last fiscal year, did a higher percentage of PWD file a formal EEO complaint alleging failure to provide a reasonable accommodation, as compared to the government-wide average?

Answer No

2. During the last fiscal year, did any complaints alleging failure to provide reasonable accommodation result in a finding of discrimination or a settlement agreement?

Answer Yes

3. If the agency had one or more findings of discrimination involving the failure to provide a reasonable accommodation during the last fiscal year, please describe the corrective measures taken by the agency.

Settlement agreements terms included attorney's fees and lump sum payments to complainants.

Section VII: Identification and Removal of Barriers

Element D of MD-715 requires agencies to conduct a barrier analysis when a trigger suggests that a policy, procedure, or practice may be impeding the employment opportunities of a protected EEO group.

1. Has the agency identified any barriers (policies, procedures, and/or practices) that affect employment opportunities for PWD and/or PWTD?

Answer No

2. Has the agency established a plan to correct the barrier(s) involving PWD and/or PWTD?

Answer N/A

3. Identify each trigger and plan to remove the barrier(s), including the identified barrier(s), objective(s), responsible official(s), planned activities, and, where applicable, accomplishments

4. Please explain the factor(s) that prevented the agency from timely completing any of the planned activities.

The FDA is reassessing its planned activities to address gaps in the disability program. Past planned activities were not a result of a true barrier analysis, thus measuring them is not feasible. The OEEEO will address this deficiency by conducting a gap analysis on the EEO program. to identify where there a shortfalls and determine how to address them.

5. For the planned activities that were completed, please describe the actual impact of those activities toward eliminating the barrier(s).

N/A

6. If the planned activities did not correct the trigger(s) and/or barrier(s), please describe how the agency intends to improve the plan for the next fiscal year.

N/A