

Affirmative Action 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.

Grade Level Cluster(GS or Alternate Pay Planb)	Total	Reportable Disability		Targeted Disability	
	#	#	%	#	%
Numerical Goal	--	12%		2%	
Grades GS-1 to GS-10	977	137	14.02	23	2.35
Grades GS-11 to SES	14101	719	5.10	98	0.69

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 OEEO and key stakeholders and will be addressed in future strategic planning, particularly as the OEEO 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

- 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 OEEEO experienced a high-level of employee attrition due to retirements and resignations. in FY20 OEEEO 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 OEEEO 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 OEEEO plans to fill several vacancies, which might include the DPM role, pending budget availability. During FY21 The OEEEO 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.

- 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	
Processing reasonable accommodation requests from applicants and employees	7	2	0	
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.

Disability Program Task	# of FTE Staff By Employment Status			Responsible Official (Name, Title, Office Email)
	Full Time	Part Time	Collateral Duty	
Section 508 Compliance	1	0	0	Rita Harrison IT Specialist
Architectural Barriers Act Compliance	0	0	0	
Special Emphasis Program for PWD and PWTB	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: Program Deficiencies In The Disability Program

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]
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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.
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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.		
Objective	To include the FDAs PAS Procedures on its public website.		
Target Date	Sep 30, 2021		
Completion Date			
Planned Activities	<i>Target Date</i>	<i>Completion Date</i>	<i>Planned Activity</i>
	Sep 30, 2021		Coordinate with stakeholders to develop and publish PAS Procedures on FDA public website.
Accomplishments	<i>Fiscal Year</i>	<i>Accomplishment</i>	
	2020	Accomplishments will be included in the FY21 MD-715 Report.	

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)]		
Objective	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.		
Target Date	Sep 30, 2022		
Completion Date			
Planned Activities	<i>Target Date</i>	<i>Completion Date</i>	<i>Planned Activity</i>
	Oct 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.
Accomplishments	<i>Fiscal Year</i>	<i>Accomplishment</i>	
	2020	Accomplishments will be included in the FY21 MD-715 Report.	

Section IV: 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.

New Hires	Total (#)	Reportable Disability		Targeted Disability	
		Permanent Workforce (%)	Temporary Workforce (%)	Permanent Workforce (%)	Temporary Workforce (%)
% of Total Applicants					
% of Qualified Applicants					
% of New Hires					

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.

New Hires to Mission-Critical Occupations	Total (#)	Reportable Disability	Targetable Disability
		New Hires (%)	New Hires (%)
Numerical Goal	--	12%	2%

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 V: 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.

Time-Off Awards	Total (#)	Reportable Disability %	Without Reportable Disability %	Targeted Disability %	Without Targeted Disability %
Time-Off Awards 1 - 10 hours: Awards Given	3408	19.47	21.59	19.35	19.49
Time-Off Awards 1 - 10 Hours: Total Hours	28928	170.45	182.74	144.35	174.77
Time-Off Awards 1 - 10 Hours: Average Hours	8	0.92	0.06	5.65	0.13
Time-Off Awards 11 - 20 hours: Awards Given	3362	21.88	21.21	33.06	20.03
Time-Off Awards 11 - 20 Hours: Total Hours	62278	421.08	392.73	652.42	382.78
Time-Off Awards 11 - 20 Hours: Average Hours	18	2.18	0.13	15.32	0.00
Time-Off Awards 21 - 30 hours: Awards Given	3438	24.40	21.31	22.58	24.70
Time-Off Awards 21 - 30 Hours: Total Hours	93283	650.06	579.65	607.26	657.14
Time-Off Awards 21 - 30 Hours: Average Hours	27	2.98	0.19	20.97	0.00
Time-Off Awards 31 - 40 hours: Awards Given	4402	27.49	28.02	29.03	27.24
Time-Off Awards 31 - 40 Hours: Total Hours	190319	1204.35	1213.59	1195.97	1205.74
Time-Off Awards 31 - 40 Hours: Average Hours	43	4.93	0.30	33.06	0.27
Time-Off Awards 41 or more Hours: Awards Given	6	0.00	0.04	0.00	0.00
Time-Off Awards 41 or more Hours: Total Hours	353	0.00	1.93	0.00	0.00
Time-Off Awards 41 or more Hours: Average Hours	58	0.00	0.38	0.00	0.00

Cash Awards	Total (#)	Reportable Disability %	Without Reportable Disability %	Targeted Disability %	Without Targeted Disability %
Cash Awards: \$501 - \$999: Awards Given	2707	20.73	16.79	19.35	20.96
Cash Awards: \$501 - \$999: Total Amount	2034426	15495.53	12613.47	14403.23	15676.37
Cash Awards: \$501 - \$999: Average Amount	751	85.57	5.30	600.00	0.40
Cash Awards: \$1000 - \$1999: Awards Given	6766	41.58	42.96	37.90	42.19
Cash Awards: \$1000 - \$1999: Total Amount	9605628	58548.34	61091.65	50086.29	59949.27
Cash Awards: \$1000 - \$1999: Average Amount	1419	161.28	10.03	1065.32	11.62
Cash Awards: \$2000 - \$2999: Awards Given	4493	21.88	29.32	20.16	22.16
Cash Awards: \$2000 - \$2999: Total Amount	10930215	52986.25	71372.49	49587.10	53549.00
Cash Awards: \$2000 - \$2999: Average Amount	2432	277.32	17.17	1983.06	-5.07
Cash Awards: \$3000 - \$3999: Awards Given	1619	7.56	10.69	8.06	7.48
Cash Awards: \$3000 - \$3999: Total Amount	5481811	25315.35	36228.10	28142.74	24847.26
Cash Awards: \$3000 - \$3999: Average Amount	3385	383.51	23.89	2813.71	-18.83

Cash Awards	Total (#)	Reportable Disability %	Without Reportable Disability %	Targeted Disability %	Without Targeted Disability %
Cash Awards: \$4000 - \$4999: Awards Given	464	1.15	3.13	0.00	1.34
Cash Awards: \$4000 - \$4999: Total Amount	2014200	4929.55	13571.15	0.00	5745.66
Cash Awards: \$4000 - \$4999: Average Amount	4340	492.90	30.63	0.00	574.50
Cash Awards: \$5000 or more: Awards Given	632	1.26	4.27	0.81	1.34
Cash Awards: \$5000 or more: Total Amount	5036500	9153.15	34243.30	4455.65	9930.84
Cash Awards: \$5000 or more: Average Amount	7969	832.07	56.60	4455.65	232.18

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.

Other Awards	Total (#)	Reportable Disability %	Without Reportable Disability %	Targeted Disability %	Without Targeted Disability %

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 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 PWTB 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 PWTB 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 (PWTB)	Answer	N/A
ii. Internal Selections (PWTB)	Answer	N/A
b. Grade GS-15		
i. Qualified Internal Applicants (PWTB)	Answer	N/A
ii. Internal Selections (PWTB)	Answer	N/A
c. Grade GS-14		
i. Qualified Internal Applicants (PWTB)	Answer	N/A
ii. Internal Selections (PWTB)	Answer	N/A
d. Grade GS-13		
i. Qualified Internal Applicants (PWTB)	Answer	N/A
ii. Internal Selections (PWTB)	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 PWTB 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
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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 VI: 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 C.F.R. § 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.

Seperations	Total #	Reportable Disabilities %	Without Reportable Disabilities %
Permanent Workforce: Reduction in Force	0	0.00	0.00
Permanent Workforce: Removal	22	0.43	0.11
Permanent Workforce: Resignation	192	1.18	1.14
Permanent Workforce: Retirement	275	2.36	1.59
Permanent Workforce: Other Separations	165	1.83	0.93
Permanent Workforce: Total Separations	654	5.80	3.76

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.

Seperations	Total #	Targeted Disabilities %	Without Targeted Disabilities %
Permanent Workforce: Reduction in Force	0	0.00	0.00
Permanent Workforce: Removal	22	0.00	0.13
Permanent Workforce: Resignation	192	1.48	1.14
Permanent Workforce: Retirement	275	1.48	1.63
Permanent Workforce: Other Separations	165	2.96	0.96
Permanent Workforce: Total Separations	654	5.93	3.86

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 VII: 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 governmentwide 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 VIII: 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 OEEO 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