

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 Yes |
| b. Cluster GS-11 to SES (PWD) | Answer Yes |

Utilizing the goal of 12 percent as a benchmark, HRSA has a trigger in the permanent workforce involving PWD in cluster GS-1 to GS-10 which has a rate of 11.11 percent in FY2020. HRSA also has a trigger in the GS-11 to SES cluster which has a rate of 8.92 percent in FY2020.

*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 Yes |
| b. Cluster GS-11 to SES (PWTD) | Answer Yes |

Utilizing the goal of 2 percent as a benchmark, HRSA has triggers in the permanent workforce involving PWTD in the GS-1 to GS-10 cluster which has a rate of 0 percent in FY2020 and the GS-11 to SES cluster which has a rate of 1.42 percent in FY2020.

Grade Level Cluster(GS or Alternate Pay Planb)	Total	Reportable Disability		Targeted Disability	
	#	#	%	#	%
Numerical Goal	--	12%		2%	
Grades GS-1 to GS-10	153	17	11.11	0	0.00
Grades GS-11 to SES	1905	170	8.92	27	1.42

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

Numerical goals are communicated to hiring managers at 1) senior staff meetings, 2) Council on Employees with Disabilities meetings, 3) pre-hiring consultations with the Selective Placement Program Coordinator, and 4) relevant trainings to include reasonable accommodations.

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 Yes

- 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	
Special Emphasis Program for PWD and PWTB	0	0	1	Robin Moore Special Emphasis Program Manager rmoore@hrsa.gov
Architectural Barriers Act Compliance	1	0	0	Katherine Slye-Griffin Reasonable Accommodations Manager kslye-griffin@hrsa.gov
Processing reasonable accommodation requests from applicants and employees	1	0	0	Katherine Slye-Griffin Reasonable Accommodations Manager kslye-griffin@hrsa.gov
Processing applications from PWD and PWTB	0	0	1	Chris Parker Director cparker@hrsa.gov
Section 508 Compliance	0	0	1	Lauren Taylor IT Specialist ltaylor1@hrsa.gov
Answering questions from the public about hiring authorities that take disability into account	0	0	2	Robin Moore Special Emphasis Program Manager rmoore@hrsa.gov

- 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

• ADA Mid-Atlantic Conference • Barrier Analysis • COR Training • Disability Program Manager Training • JAN (Job Accommodation Network) webinars • Sick Leave and Reasonable Accommodation (hosted by LRP) • Successfully Navigating Performance and Conduct Issues Under the Rehabilitation Act (hosted by LRP) • Training on the Interactive Process (hosted by LRP)

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	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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Objective	Ensure all RA requests are processed within the timeframe set forth in the Agency’s procedures for reasonable accommodation.		
Target Date	Sep 30, 2018		
Completion Date			
Planned Activities	<u>Target Date</u>	<u>Completion Date</u>	<u>Planned Activity</u>
	Feb 28, 2016	December 31, 2016	Recruit and hire a qualified manager to lead and oversee the activities of HRSA’s Accessibility Team.
	Sep 30, 2017	September 30, 2017	Develop “RA Refresher Training for Managers and Supervisors” to acclimate HRSA management to the RAPT System.
	Sep 30, 2017	September 30, 2017	Deploy the web-based RA processing system for use by HRSA employees and management.
	Sep 30, 2017	September 30, 2017	Finalize the RA Policy and Procedures Manual.
	Oct 31, 2017	September 30, 2017	Disseminate the finalized RA Policy and Procedures Manual.
	Sep 30, 2018	September 30, 2018	Perform quarterly RA processing audits to access improvements in RA request processing times.
	Sep 30, 2018	September 30, 2018	Provide “RA Refresher Training for Managers and Supervisors” to acclimate HRSA management to the RAPT System and educate leaders on the revised RA policy and procedures.
	Sep 30, 2018	September 30, 2018	Report findings and key steps to be taken to address any barriers to improving processing times to leadership.
	Sep 30, 2019	September 30, 2019	Continue to perform quarterly RA processing audits to access improvements in RA request processing times.
	Sep 30, 2019	September 30, 2019	Continue to provide “RA Refresher Training for Managers and Supervisors” to HRSA management to discuss the RAPT System and educate leaders on the RA policy and procedures.
	Sep 30, 2019	September 30, 2019	Continue to report findings and key steps to be taken to address any barriers to improving processing times to leadership.
	Jan 31, 2020	January 31, 2020	Appoint a team lead to provide mentorship, coaching, and support in escalating cases to the Accessibility Manager.
	Mar 31, 2020		Cross train employees on the RA request processing protocol and redirect resources to the HRSA RA Program to process new RA requests.
	Sep 30, 2020	September 30, 2020	Expand benchmarking within RAPT System to track the effect of non-responsiveness among supervisors.
	Sep 30, 2020	September 30, 2020	Conduct a comprehensive assessment using RAPT System benchmarking of the supervisory non-responsiveness to identify additional barriers and improve processing times.
	Sep 30, 2020	September 30, 2020	Report findings and recommendations for corrective actions to leadership for Agency-wide implementation.
Jan 31, 2021		Use HRSA intranet to report key aggregate RA data including RA processing timeframes and responsiveness	
Mar 30, 2021		Determine the feasibility of requiring all managers and supervisors, including supervisory team leaders, to undergo routine reasonable accommodations training, and make necessary recommendations to Agency Head.	
Sep 30, 2021		Implement stated recommendation(s) per the direction of Agency Head.	
Accomplishments			

<i>Fiscal Year</i>	<i>Accomplishment</i>
2018	<p>In FY 2018, HRSA significantly improved RA case processing times. Specifically, HRSA processed a total of 238 cases in FY 2018. Fifty-eight percent (139) of HRSA’s RA cases were decided within the timeline of 15 business days. On average, clients received decisions in 19 days. HRSA approved 63.9 percent (152) of the cases processed and provided 83.6 percent (127) of those approvals within the timeline of 30 business days. On average, clients received approved accommodations within 12 days of the decision. When looking at the overall RA process, total case processing averaged 27 days with 80.7 percent (192) of all case processing completed within the timeline of 45 business days. Whereas HRSA processed 32 percent of its cases timely in FY 2017, the improved processing timeframes in FY 2018 reflect a 153 percent increase in the number of RA cases that were processed in a timely manner over the course of a single fiscal year.</p>
2017	<p>For 3 years, HRSA has been working on revising the HRSA RA Policy and Procedures Manual. HRSA’s previous RA Policy and Procedures Manual was signed in November 2012 and contained unintended risks to HRSA’s RA Program. For example, the EEOC has historically required agencies to process 90 percent of all requests for RA within the timeframes established under agency RA policy. At HRSA, Section III, Part D of the RA Policy and Procedures Manual specifies that the Agency would approve or deny a request for RA in no more than 10 business days. Additionally, if a request was approved, HRSA had 10 business days to provide the accommodation to the requestor. HRSA completed a 5-year trend analysis (FY 2011 to FY 2015) to study the appropriateness of these requirements. Despite clear improvements in the program’s processing times, the rapid processing requirements were an on-going risk as it had been unable to meet the EEOC’s 90 percent requirement. Based on the analysis, HRSA established a more tenable requirement of 15 business days from “request to decision” and 30 days “decision to provision.” These changes also brought HRSA’s procedures in line with processing times used by other HHS OpDivs. The process of modifying the policy began in 2014 with a 9-month workgroup tasked with both evaluating RA program deficiencies and developing recommendations to improve program efficiency and effectiveness. That workgroup led to a number of critical program changes including the development and implementation of an RA processing system; increased training for HRSA staff and management; and implementation of a tiered, team approach for processing requests (instead of a single staff member processing all requests). HRSA implemented the final recommendation of the workgroup when the RA Policy was signed into effect following receipt of EEOC final approval on September 13, 2017. The policy itself was repeatedly refined over time as it was bargained with the National Treasury Employees Union as well as being reviewed and approved by HRSA senior staff, the HHS Office of the Secretary, and the HHS Office of the General Council. Additionally, when EEOC released the final rule on Section 501 of the Rehabilitation Act of 1973 in January 2021, supplementary changes were made to ensure that HRSA’s policy was fully compliant with all EEOC requirements. The policy and procedures manual is accessible to all employees and applicants via the Internet. HRSA provides a refresher training to employees that covers key elements of the revised RA policy and procedures. With the new RA policy in place, HRSA expects to see a significant improvement in the efficiency of case processing. Improvements are already visible in processing requests for disability services such as sign language interpreting and personal assistant services. These requests occur and require fast processing allowing for real time data analysis. “Typical” requests for accommodation such as telework, schedule changes, and workstation modifications occur over longer periods of time due to the addition of procurement processes and extended periods of time for the interactive process. Accordingly, these results will be fully evaluated at the end of FY 2018.</p>

<i>Fiscal Year</i>	<i>Accomplishment</i>
2019	<p>In FY 2019, HRSA focused on timely decision making among managers through (1) continued RA training, (2) the implementation of a revised escalation plan outlining the steps to take to address unresponsive managers/supervisors, and (3) the use of Diversity and Inclusion Profile meetings to address responsiveness. However, case analysis shows that HRSA supervisors remain slow to respond to RA requests, require reminders to respond, or request extensions to respond. As an example, markers built into the Reasonable Accommodations Processing and Tracking System and used by the Accessibility Specialists when issuing a reminder show that 30 cases required multiple formal (i.e., email) reminders with 11 of those requiring further escalation to include an up-line manager. The reminder rate for informal reminders (i.e., phone calls which are also tracked) is higher. Benchmarking this (and similar) data within the process has proved the most effective way to track processing times for improvement. In response to these trends, HRSA will (1) draft an SOP on case escalation, (2) develop a plan for additional markers and/or reporting on supervisory response time, (3) conduct RA analysis based on case complexity to determine additional factors which impact processing, and (4) develop a short form training for managers and supervisors to bring more management officials into compliance with RA training. Additionally, HRSA will use its intranet to report key aggregate RA data to include Bureau/Office average processing timeframes and responsiveness. In response to these trends, HRSA will 1) draft an SOP on case escalation, 2) develop a plan for addition markers and/or reporting on supervisory response time, 3) conduct RA analysis based on case complexity to determine additional factors which impact processing, and 4) develop a short form training for managers and supervisors to bring more management officials into compliance with RA training. Additionally, the Agency will use the HRSA intranet to report key aggregate RA data to include Bureau/Office average processing timeframes and responsiveness.</p>
2020	<p>In FY 2020, HRSA processed 81 percent of its RA requests within the 45-day timeframe set forth in the RA Policy and Procedures Manual. This represents a 27 percent increase in requests processed timely from FY 2019 in which HRSA processed 64 percent of the requests timely. Moreover, for FY 2020, improvements in case processing occurred in most areas when compared to the FY 2019 data. All three of the “average day” metrics (decision, provision, and overall) improved (i.e., the number of days decreased) and the processing rates for all three metrics (issuance, implementation, and overall processing) improved significantly. This improvement is due to: (1) OCRDI’s targeted approach to case processing, (2) the COVID-19 pandemic which reduced the caseload as compared to previous years, and (3) a comprehensive audit which enhanced data analysis and reporting capabilities. HRSA is working to improve the areas of average days to decision and the issuance of metrics. During FY 2020, HRSA’s RA program established targeted internal benchmarks for areas which were identified as needing improvement. These areas include: (1) denials where no medical documentation nor responses have been submitted by the requestor in 15 business days/21 calendar days, (2) quality assurance checks on “findings” and Decision Letters in 2 business days, and (3) supervisor response times (and numbers of reminders the Accessibility Specialist or Accessibility Section Chief provide) in 3 business days with one reminder. While these benchmarks aided processing in FY 2020, HRSA will continue to monitor and work on this area in FY 2021 and will continue to monitor program efficiency and effectiveness through the auditing process while also seeking ways to refine and enhance program operations during FY 2021.</p>

Brief Description of Program Deficiency	C.3.b.6. Provide disability accommodations when such accommodations do not cause an undue hardship? [see 29 CFR §1614.102(a)(8)]		
Objective	1) Establish a method to better rate managers and supervisors on their efforts to ensure EEO. Date initiated 7/1/19; target date 9/30/20; modified date 12/31/21. 2) Ensure managers and supervisors are fully rated on their commitment to EEO. Date initiated 9/30/20; target date 1/31/21; modified date 1/31/22.		
Target Date	Jan 31, 2021		
Completion Date			
Planned Activities	<u>Target Date</u>	<u>Completion Date</u>	<u>Planned Activity</u>
	Jan 31, 2021		Same as "Planned Activities Toward Completion of Objective" list under Part H, Section C.3.b.1
Accomplishments	<u>Fiscal Year</u>	<u>Accomplishment</u>	
	2019	Same as 2019 Accomplishments under Part H, Section C.3.b.1	
	2020	Same as 2020 Accomplishments under Part H, Section C.3.b.1	

Brief Description of Program 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]		
Objective	Transition from RNO to ERI data and correct data errors		
Target Date	Sep 30, 2021		
Completion Date			
Planned Activities	<u>Target Date</u>	<u>Completion Date</u>	<u>Planned Activity</u>
	May 1, 2020		Initiate planning to transition from RNO to ERI data
	Oct 30, 2020		HHS to brief OHR and OCIO on high-level issues (HRSA completed on 05/31/2020)
	Nov 20, 2020		Benchmark other agencies
	Jan 20, 2021		Each OpDiv works with OHR/OCIO to correct migration errors
	Jan 30, 2021		Develop survey campaign
	Feb 28, 2021		Recruit for Data Analytics Director
	Mar 31, 2021		Establish a data analysis workgroup and a marketing workgroup
	Mar 31, 2021		HHS to meet with OHR/OCIO and develop plan of action to address changeover of data from BIIS to EHCM (HRSA completed on 06/30/2020)
	Apr 30, 2021		Develop survey questions
	May 30, 2021		Develop online survey tool
	Jun 30, 2021		Test online platform
	Jul 16, 2021		Educate employees on survey process
	Aug 30, 2021		Launch annual survey campaign
	Sep 30, 2021		Conduct analysis of data
	Oct 31, 2021		Launch Data Analytics Division
Oct 31, 2021		Brief and issue report to leadership	
Oct 31, 2021		Brief HHS community	
Accomplishments	<u>Fiscal Year</u>	<u>Accomplishment</u>	
	2020	-Initiated planning to transition from RNO to ERI data -Initiated planning to conduct survey of HHS workforce	

Objective	Establish Data Analytics Division in EEODI		
Target Date	Oct 1, 2021		
Completion Date			
Planned Activities	<u>Target Date</u>	<u>Completion Date</u>	<u>Planned Activity</u>
	May 1, 2020		Initiate planning to transition from RNO to ERI data
	Oct 30, 2020		HHS to brief OHR and OCIO on high-level issues (HRSA completed on 05/31/2020)
	Nov 20, 2020		Benchmark other agencies
	Jan 20, 2021		Each OpDiv works with OHR/OCIO to correct migration errors
	Jan 30, 2021		Develop survey campaign
	Feb 28, 2021		Recruit for Data Analytics Director
	Mar 31, 2021		HHS to meet with OHR/OCIO and develop plan of action to address changeover of data from BIIS to EHCM (HRSA completed on 06/30/2020)
	Mar 31, 2021		Establish a data analysis workgroup and a marketing workgroup
	Apr 30, 2021		Develop survey questions
	May 30, 2021		Develop online survey tool
	Jun 30, 2021		Test online platform
	Jul 16, 2021		Educate employees on survey process
	Aug 30, 2021		Launch annual survey campaign
	Sep 30, 2021		Conduct analysis of data
	Oct 31, 2021		Launch Data Analytics Division
	Oct 31, 2021		Brief and issue report to leadership
Oct 31, 2021		Brief HHS community	
Accomplishments	<u>Fiscal Year</u>	<u>Accomplishment</u>	
	2020	-Initiated planning to transition from RNO to ERI data -Initiated planning to conduct survey of HHS workforce	

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.

HRSA has a Disability Employment Program Manager who also serves as the Agency’s Selective Placement Program Coordinator. This individual is primarily responsible for recruiting individuals with a disability through direct and indirect contact. Additionally, human resources personnel are available to consult with persons with disabilities at various career fairs.

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

HRSA fully uses special hiring authorities to fill open positions and educates potential applicants on the process. Information can be obtained from (1) HRSA’s website, (2) human resources personnel, and (3) the Selective Placement Program Coordinator.

- 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.

HRSA follows the OPM guidance on appropriate Schedule A letters to determine applicants' eligibility. When eligible Schedule A applicants apply to HRSA's government-wide job vacancy announcements, qualified applicants are forwarded to hiring officials via a USA Staffing Certificate of non-competitive eligible applicants. Additionally, HRSA accepts potential candidates who supply their Schedule A certificate and a letter of interest. HRSA's human resources personnel determines eligibility and notifies the Selective Placement Program Coordinator who will alert the hiring officials of eligibility.

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 No

While HRSA offered training on special hiring authorities, it is not mandatory for hiring officials to participate as most hiring officials receive training one-on-one or in a group as appropriate. Additionally, OHR holds pre-hire consultations with all hiring managers in which the use of special hiring authorities is discussed.

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.

HRSA has a list-serv of disability-serving institutions and uses that list-serv to communicate job opportunities. Each year, HRSA reaffirms its relationship with these institutions as well as establishes partnerships with others.

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

Using the goal of 12 percent as a benchmark, HRSA has a trigger involving PWDs among new hires in the permanent workforce which had a new hire rate of 9.88 percent in FY 2020. Additionally, using the goal of 2 percent as a benchmark, HRSA has a trigger involving PWTDs among new hires in the permanent workforce which had a new hire rate of 0.58 percent in FY 2020.

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 qualified applicant pool of 4.80 percent as a benchmark, triggers exists among PWDs and PWTDs in 0685, 0343, and 2210 positions, HRSA’s most populous MCOs, as PWD were hired at a rate of 4.17 percent in MCO 0685 for FY 2020 and PWTD was not hired for MCO 0685. Further, there were no new hires for PWTD for MCO 343 in FY 2020. Lastly, there were no new hires for PWTD in MCO 2210 in FY 2020.

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 No
- b. Qualified Applicants for MCO (PWTD) Answer No

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 No

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.

To ensure PWDs have sufficient opportunities for advancement, HRSA: • fosters strategic partnerships among the HRSA Learning Institute and HRSA’s Disability Employment Program Manager to assess the applicant flow data associated with career development programs and provides recommendations for improving participation rates among PWDs as necessary, • communicates advancement opportunities to HRSA’s Council on Employees with Disabilities to ensure broad dissemination, and • posts detail opportunities on HRSA’s intranet for easy access among PWDs.

B. CAREER DEVELOPMENT OPPORTUNITIES

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

HRSA offered three formal career development programs in FY 2020: Mid-Level Development Program, Senior Leadership Fellows Program, and the Administrative Professionals Career Enhancement Program. The Mid-Level Development Program is a capacity-building initiative targeting HRSA employees at the GS-12 and GS-13 levels who have expressed an interest in leadership development and have a desire to become part of a pool of highly skilled and qualified employees who can be called upon to step into leadership roles as needs arise. Graduates of the program increase their knowledge and skills in leadership; gain interdepartmental project experience; have exposure to HRSA leaders; and gain an increased understanding of HRSA’s mission, challenges, and opportunities. As the largest population of employees at HRSA, developing leaders at this level is crucial to HRSA’s future success. The Senior Leader Fellowship Program is designed to ensure HRSA leaders are among the best in the federal government. Participants experience a broad spectrum of development opportunities based on best practices of renowned leadership programs in the public and private sector. The program includes self-reflection, industry and federal speakers, networking, outside study and activities, executive coaching, and engaging discussions focused on the Office of Personnel Management’s Executive Core Qualifications, and HRSA leadership competencies. The Administrative Professionals Career Enhancement Program is a structured framework that employees who are in administrative roles/functions may use in developing and enhancing their current job performance as well as providing guidance for a long term career path in the administrative profession or an alternative career path. The program aims to help employees in administrative roles/functions enhance their skills necessary to be successful in their current position while promoting career growth and development. In addition to the three formal career development programs, HRSA offered the Mentoring Now Program and the implementation of Individual Development Plans (IDPs) during the reporting period. The Mentoring Now Program is an HRSA-wide mentoring program that creates a culture of knowledge-sharing with colleagues and prepares future leaders. The program serves to motivate, develop, and retain talent by providing comprehensive mentoring on professional development and career advancement to the mentees. Lastly, HRSA employees seek guidance from their supervisors in the development of IDPs. IDPs usually consist of a wide array of development opportunities that span the scope of the formal career development programs. IDPs are individually tailored action plans that develop specific competencies (knowledge and skills) needed to improve current performance or to prepare for new responsibilities. Individuals use these plans to invest in long-term self-development while accomplishing important day-to-day work.

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 (%)
Mentoring Programs	34	34	20.59	20.59	2.94	2.94
Coaching Programs	130	130	8.46	8.46	1.54	1.54
Training Programs	82	42	9.76	14.29	3.66	4.76
Detail Programs	--	--	--	--	--	--
Other Career Development Programs	--	--	--	--	--	--
Internship Programs	--	--	--	--	--	--
Fellowship Programs	25	21	12.00	14.29	0	0

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 No
- b. Selections (PWD) Answer No

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 No
- b. Selections (PWTD) Answer No

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 Yes
- b. Awards, Bonuses, & Incentives (PWTD) Answer Yes

Using the inclusion rate of 9.65 percent as a benchmark, HRSA has triggers involving PWDs receiving time-off awards between 21-30 hours (9.29 percent) and 31-40 hours (8.49 percent). Triggers also exist among PWD for cash awards in the category dollar amount ranges of \$2,000-\$2,999 (6.35 percent); \$3,000-\$3,999 (6.06 percent); \$4,000-\$4,999 (3.57 percent); and \$5,000 or more (6.06 percent). Further, using the inclusion rate of 2.80 percent for PWTDs as a benchmark, HRSA has triggers involving the distribution of time-off awards in all categories and triggers in all dollar amount ranges.

Time-Off Awards	Total (#)	Reportable Disability %	Without Reportable Disability %	Targeted Disability %	Without Targeted Disability %
Time-Off Awards 1 - 10 hours: Awards Given	449	26.06	21.48	33.33	24.84
Time-Off Awards 1 - 10 Hours: Total Hours	3937	235.11	187.80	318.52	221.12
Time-Off Awards 1 - 10 Hours: Average Hours	8	4.79	0.46	33.33	0.00
Time-Off Awards 11 - 20 hours: Awards Given	380	21.28	18.50	29.63	19.88
Time-Off Awards 11 - 20 Hours: Total Hours	7087	378.19	347.59	596.30	341.61
Time-Off Awards 11 - 20 Hours: Average Hours	18	9.04	1.03	74.07	-1.86
Time-Off Awards 21 - 30 hours: Awards Given	183	9.04	8.99	3.70	9.94
Time-Off Awards 21 - 30 Hours: Total Hours	4815	222.87	236.31	88.89	245.34
Time-Off Awards 21 - 30 Hours: Average Hours	26	12.77	1.49	88.89	0.00
Time-Off Awards 31 - 40 hours: Awards Given	377	17.02	18.44	14.81	17.39
Time-Off Awards 31 - 40 Hours: Total Hours	14545	621.28	717.75	592.59	626.09
Time-Off Awards 31 - 40 Hours: Average Hours	38	19.15	2.18	148.15	-2.48
Time-Off Awards 41 or more Hours: Awards Given	0	0.00	0.00	0.00	0.00
Time-Off Awards 41 or more Hours: Total Hours	0	0.00	0.00	0.00	0.00

Time-Off Awards	Total (#)	Reportable Disability %	Without Reportable Disability %	Targeted Disability %	Without Targeted Disability %
Time-Off Awards 41 or more Hours: Average Hours	0	0.00	0.00	0.00	0.00
Cash Awards	Total (#)	Reportable Disability %	Without Reportable Disability %	Targeted Disability %	Without Targeted Disability %
Cash Awards: \$501 - \$999: Awards Given	627	34.04	30.07	48.15	31.68
Cash Awards: \$501 - \$999: Total Amount	460863	24943.62	22139.92	36944.44	22931.06
Cash Awards: \$501 - \$999: Average Amount	735	389.36	42.15	2840.74	-21.74
Cash Awards: \$1000 - \$1999: Awards Given	802	46.81	38.55	44.44	47.20
Cash Awards: \$1000 - \$1999: Total Amount	1093300	65392.55	52174.57	62092.59	65945.96
Cash Awards: \$1000 - \$1999: Average Amount	1363	743.09	77.49	5174.07	0.00
Cash Awards: \$2000 - \$2999: Awards Given	425	14.36	21.94	11.11	14.91
Cash Awards: \$2000 - \$2999: Total Amount	1013992	33662.23	52425.37	24655.56	35172.67
Cash Awards: \$2000 - \$2999: Average Amount	2385	1246.28	136.83	8218.52	77.02
Cash Awards: \$3000 - \$3999: Awards Given	165	5.32	8.76	0.00	6.21
Cash Awards: \$3000 - \$3999: Total Amount	570508	18815.96	30253.04	0.00	21971.43
Cash Awards: \$3000 - \$3999: Average Amount	3457	1881.38	197.71	0.00	2196.89
Cash Awards: \$4000 - \$4999: Awards Given	112	2.13	6.19	7.41	1.24
Cash Awards: \$4000 - \$4999: Total Amount	495674	8859.04	27435.22	30848.15	5171.43
Cash Awards: \$4000 - \$4999: Average Amount	4425	2214.36	254.01	15422.22	-0.62
Cash Awards: \$5000 or more: Awards Given	66	2.13	3.38	3.70	1.86
Cash Awards: \$5000 or more: Total Amount	542322	14655.32	28549.26	35500.00	11159.63
Cash Awards: \$5000 or more: Average Amount	8217	3663.83	483.85	35500.00	-1675.16

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 Yes

b. Pay Increases (PWTD) Answer Yes

Using the inclusion rate of 9.65 percent as a benchmark, HRSA has triggers involving PWDs receiving QSIs (8.14 percent) and among PWTD receiving QSIs (1.36 percent).

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

N/A

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 No
 - ii. Internal Selections (PWD) Answer No
- b. Grade GS-15
 - i. Qualified Internal Applicants (PWD) Answer No
 - ii. Internal Selections (PWD) Answer No
- c. Grade GS-14
 - i. Qualified Internal Applicants (PWD) Answer No
 - ii. Internal Selections (PWD) Answer No
- d. Grade GS-13
 - i. Qualified Internal Applicants (PWD) Answer No
 - ii. Internal Selections (PWD) Answer No

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 No
 - ii. Internal Selections (PWTD) Answer No
- b. Grade GS-15
 - i. Qualified Internal Applicants (PWTD) Answer No

ii. Internal Selections (PWTD)	Answer	No
c. Grade GS-14		
i. Qualified Internal Applicants (PWTD)	Answer	No
ii. Internal Selections (PWTD)	Answer	No
d. Grade GS-13		
i. Qualified Internal Applicants (PWTD)	Answer	No
ii. Internal Selections (PWTD)	Answer	No

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	Yes
c. New Hires to GS-14 (PWD)	Answer	Yes
d. New Hires to GS-13 (PWD)	Answer	No

PWD were not among the applicant pool of new hires for senior executive positions in FY 2020. Further, using the qualified applicant pool of 4.80 percent as a benchmark, triggers exist among PWDs for new hires to GS-15 (2.94 percent qualified but not selected) and GS-14 (3.33 percent qualified but not selected).

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	No
c. New Hires to GS-14 (PWTD)	Answer	Yes
d. New Hires to GS-13 (PWTD)	Answer	No

Using the qualified applicant pool of 4.80 percent as a benchmark, triggers exist among PWTDs for new hires to GS-14 level positions (3.33 percent qualified but was not selected).

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	No
ii. Internal Selections (PWD)	Answer	No
c. Supervisors		
i. Qualified Internal Applicants (PWD)	Answer	No
ii. Internal Selections (PWD)	Answer	No

There were no internal announcements for executive positions in FY 2020.

6. Does your agency have a trigger involving PWTB 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 (PWTB)	Answer	N/A
ii. Internal Selections (PWTB)	Answer	N/A
b. Managers		
i. Qualified Internal Applicants (PWTB)	Answer	No
ii. Internal Selections (PWTB)	Answer	No
c. Supervisors		
i. Qualified Internal Applicants (PWTB)	Answer	No
ii. Internal Selections (PWTB)	Answer	No

There were no internal announcements for executive positions in FY 2020.

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	No
c. New Hires for Supervisors (PWD)	Answer	No

N/A

8. Using the qualified applicant pool as the benchmark, does your agency have a trigger involving PWTB 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 (PWTB)	Answer	N/A
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- b. New Hires for Managers (PWTD) Answer No
- c. New Hires for Supervisors (PWTD) Answer No

N/A

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 Yes

All Schedule A employees eligible for conversion in FY 2019 were converted into the competitive service with the exception of one employee whose conversion was delayed until October 2019.

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

Seperations	Total #	Reportable Disabilities %	Without Reportable Disabilities %
Permanent Workforce: Reduction in Force	0	0.00	0.00
Permanent Workforce: Removal	2	0.00	0.11
Permanent Workforce: Resignation	18	1.46	0.79
Permanent Workforce: Retirement	45	1.46	2.22
Permanent Workforce: Other Separations	29	1.94	1.32
Permanent Workforce: Total Separations	94	4.85	4.43

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

Seperations	Total #	Targeted Disabilities %	Without Targeted Disabilities %
Permanent Workforce: Reduction in Force	0	0.00	0.00
Permanent Workforce: Removal	2	0.00	0.10
Permanent Workforce: Resignation	18	3.23	0.82

Seperations	Total #	Targeted Disabilities %	Without Targeted Disabilities %
Permanent Workforce: Retirement	45	0.00	2.17
Permanent Workforce: Other Separations	29	0.00	1.40
Permanent Workforce: Total Separations	94	3.23	4.49

- 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.

- 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.

Public website: <https://www.hrsa.gov/about/508-resources.html> File a complaint: HRSAAccessibility@hrsa.gov

- 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.

Public website: <https://www.hrsa.gov/eeo/no-fear-act/lawsandprotections>

- 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.

508 Accessibility • OCRDI includes Section 508 requirements in its RA Training for Managers and Supervisors, RA Refresher Training for Managers and Supervisors, RA Training for Employees, and New Employee Orientation. • OCRDI provides TA to HRSA Bureaus and Offices to ensure equal access for persons with disabilities. • In FY 2020, OCRDI met with HRSA’s 508 Team to discuss HRSA’s mandatory trainings for 508 compliance. The following trainings come directly from HHS: Records Management and Cybersecurity (Rules of Behavior). If there is an issue with compliance, a waiver is posted in the course description and an alternative version of the training is made available. • The 508 Team confirmed that FY 2019 Records Management training was not 508 compliant. It was determined that the HRSA’s 508 Team would collaborate with HHS to modify and remediate the training before the FY 2021 roll out. The reason for the modification/remediation is the training is too long and some content in the PowerPoint does not apply. Despite the functionality of the training, the Cybersecurity Awareness training is compliant because an alternative format is offered. Safety and Evacuations for PWDs • HRSA Safety plans two fire drills per year and has 30 on-site employees with an Individual Evacuation Plan. Once the fire drill is over, HRSA Safety solicits feedback from employees. The most common concern/issue received by HRSA Safety is below: o Some individuals reported the response time takes too long after they used the Blue Emergency phone. The primary reason for the delay is the Security Operations Center versus the large number of potential callers. The individuals expect some to evacuate them during drills; however, HRSA addressed this concern numerous times during the creation and annual review of plans. • During an evacuation, HRSA Safety relays to the Incident Commander the approximate location of the individuals. The best course of action to safely evacuate the individuals is determined by the Incident Commander (HRSA is not involved in the decision process once we have provided the pertinent information). • HRSA Safety conducts monthly and/or quarterly meetings with stakeholders. Every quarter, HRSA Safety meetings are scheduled with each floor’s Occupant Emergency Organization, where specific roles, responsibilities, and training requirements are reviewed. • HRSA Safety addresses the needs of PWDs by asking for voluntary self-identification during New Employee Orientation. Once the HRSA Safety team receives notification of self-identification, a meeting is scheduled to discuss specifics the individual may need. A member of HRSA Safety reviews the following with the individual: o Building safety and emergency notification systems o

Location of Shelter In Place and the location of the fire-rated areas in the building o A walkthrough from their general work area to a fire-safe area of the building o Assignment of an assistant if needed/requested o Documentation of their evacuation plan • HRSA Safety confirmed the new construction at 5600 Fishers Lane included the following: o The renovation met all current Life Safety 101 requirements. Numerous areas have been designed and used as fire-safe areas. Additional emergency communication devices (Blue Phones) were installed to the Security Operations Center that is monitored/staffed 24/7.

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.)

Total cases processed (Internal benchmark: None): 120 Total cases approved (Internal benchmark: None): 52.5% (63) Days to issue a decision to the client (measured from date of request) (Internal benchmark: 15 business days): 27.4 days on average; 45.8% (55) issued within timelines. Days to provide approved RAs (measured from date of issued decision) (Internal benchmark: 30 business days): 5.9 days on average; 96.8% (61) issued within timelines. Total case processing time (measured from date of request to the date of the final action for the case e.g., denial or RA provision) (Internal benchmark: 45 business days): 30.6 days on average; 80.8% (97) issued within timelines.

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.

HRSA has a highly effective RA program and policy. For FY 2020, improvements were made over FY 2019 data in case processing timeliness. All three of the "average day" metrics (decision, provision, and overall) improved (i.e., the number of days decreased), and the processing rates for all three metrics (issuance, implementation, and overall processing) improved significantly. This is due to: (1) OCRDI's targeted approach to case processing; (2) the COVID-19 pandemic which reduced the caseload as compared to previous years; and (3) a comprehensive audit which enhanced data analysis and reporting capabilities. HRSA is working to improve the areas of average days to decision and the issuance of metrics. During FY 2020, HRSA's RA program established targeted internal benchmarks for areas which were identified as needing improvement. These areas include (1) denials where no medical documentation nor responses have been submitted by the requestor in 15 business days/21 calendar days, (2) quality assurance checks on "findings" and Decision Letters in 2 business days, and (3) supervisor response times (and numbers of reminders the Accessibility Specialist or Accessibility Section Chief provide) in 3 business days with one reminder. While these benchmarks aided processing during FY 2020, HRSA will continue to monitor and work on this area in FY 2021. Public Website: Please note that the HRSA RA policy and procedures have been publicly available on the HRSA website since the policy was modified and updated in FY 2016. The document link has remained public since its posting on September 28, 2017, and the link to the posting is as follows: <https://www.hrsa.gov/sites/default/files/hr/nofearact/forms/ramanual.pdf>. As of January 2021, OCRDI has extended its public-facing web presence, and the manual is now prominently featured, and the link to the posting is as follows: <https://www.hrsa.gov/about/organization/bureaus/ocrdi#reasonable-accommodations>.

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.

HRSA has one employee who is eligible for PAS. Due to the COVID-19 pandemic, the employee did not need nor request PAS

during FY 2020. However, the client reports being fully satisfied with program operations and the services received in the past. In regard to training, HRSA’s RA Training for Managers/Supervisors and the subsequent course, RA Refresher for Managers/Supervisors, review the similarities and differences between PAS and other service types (sign language interpreting, readers, escorts, etc.), as well as the process used to make a request for such services. Public Website: Please note the HRSA PAS policy and procedures have been publically available on the HRSA website since September 28, 2017. The PAS procedures begin on page 31 of HRSA’s RA Policy and Procedures Manual and the link to the posting is as follows: https://www.hrsa.gov/sites/default/files/hr/nofearact/forms/ramanual.pdf.

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 Yes

- 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 No

- 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.

N/A, there were no findings of discrimination.

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 Yes

- 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.

N/A

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 Yes

- 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

Source of the Trigger:	Other					
Specific Workforce Data Table:	Workforce Data Table - B1					
STATEMENT OF CONDITION THAT WAS A TRIGGER FOR A POTENTIAL BARRIER: Provide a brief narrative describing the condition at issue. How was the condition recognized as a potential barrier?	All fields in this Trigger table should say "N/A," as HRSA has not yet established a plan to correct the barrier(s). The "Specific Workforce Data Table" field forced me to select a workforce data table.					
STATEMENT OF BARRIER GROUPS:	<i>Barrier Group</i> People with Disabilities					
Barrier Analysis Process Completed?:	N					
Barrier(s) Identified?:	N					
STATEMENT OF IDENTIFIED BARRIER: Provide a succinct statement of the agency policy, procedure or practice that has been determined to be the barrier of the undesired condition.	Barrier Name		Description of Policy, Procedure, or Practice			
	N/A		N/A			
Objective(s) and Dates for EEO Plan						
Date Initiated	Target Date	Sufficient Funding / Staffing?	Date Modified	Date Completed	Objective Description	
08/31/2021	08/31/2021	No			All fields in this Trigger table should say "N/A," as HRSA has not yet established a plan to correct the barrier(s). This form forced me to select initiated and target dates.	
Responsible Official(s)						
Title		Name		Standards Address The Plan?		
N/A		N/A		No		
Planned Activities Toward Completion of Objective						
Target Date	Planned Activities			Sufficient Staffing & Funding?	Modified Date	Completion Date
08/31/2021	All fields in this Trigger table should say "N/A," as HRSA has not yet established a plan to correct the barrier(s). This form forced me to select a target date			No		

Report of Accomplishments	
Fiscal Year	Accomplishment
2020	N/A

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

N/A

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