# U.S. Equal Employment Opportunity Commission

**Federal Agency Annual**

**EEO Program Status Report**

Management Directive – 715

Office of Equal Employment Opportunity

Centers for Disease Control and Prevention

Department of Health and Human Services

For period covering October 1, 2022 – September 30, 2023

## **PART E: Executive Summary: Mission of CDC and EEO Program**

The Centers for Disease Control and Prevention (CDC) is one of 11 major operating divisions of the Department of Health and Human Services (DHHS) and is the nation’s leading public health agency. For over 75 years, CDC’s mission has been to work 24/7 to protect America from health, safety, and security threats, both foreign and in the United States (U.S.). CDC serves as the national focus for developing and applying disease prevention and control, environmental health, and health promotion and health education activities designed to improve the health of the people of the U.S.

Whether diseases start at home or abroad, are chronic or acute, curable, or preventable, human error or deliberate attack, CDC’s mission is to save lives and protect people from health threats. To accomplish our mission, CDC conducts critical science and provides health information that protects our nation against expensive and dangerous health threats and responds when these arise.

In April 2022, CDC launched an effort to refine and modernize its structures, systems, and processes to strengthen the agency’s ability to deliver CDC’s science and program activities to the American people. Subject matter experts reviewed key workflows, with a particular focus on ensuring CDC’s science reaches the public in an understandable, accessible, and implementable manner as quickly as possible. Subsequently in February 2023, CDC updated their [organizational structure](https://www.cdc.gov/about/pdf/organization/cdc-org-chart.pdf) to reflect the following:

CDC’s Immediate Office of the Director (IOD), includes the following positions:

• CDC Director

• Principal Deputy Director

• Deputy Director for Science and Program/Chief Medical Officer

• Deputy Director for Policy, Communications, and Legislative Affairs/Chief Strategy Officer

• Deputy Director of Global Health

• Chief Operating Officer

• Chief of Staff

There are 12 offices that report directly to the IOD, these include:

• CDC Washington Office

• Office of Communications

• Office of the Chief Operating Officer

• Office of Human Resources

• Office of Financial Resources

• Office of Safety, Security, and Asset Management

• Office of the Chief Information Officer

• Office of Strategic Business Initiatives

• Office of the Chief of Staff

• Office of Equal Employment Opportunity and Workplace Equity

• Office of the General Counsel

• Office of Health Equity

• Office of Laboratory Science and Safety

• Office of Policy, Performance, and Evaluation

• Office of Public Health Data, Surveillance, and Technology

• Office of Readiness and Response

• Office of Science

There are also 12 centers and 1 institute directly report to the IOD:

• Agency for Toxic Substances and Disease Registry

• Center for Forecasting and Outbreak Analytics

• Global Health Center

• National Center on Birth Defects and Developmental Disabilities

• National Center for Chronic Disease Prevention and Health Promotion

• National Center for Emerging and Zoonotic Infectious Diseases

• National Center for Environmental Health

• National Center for Health Statistics

• National Center for Human Immunodeficiency Virus (HIV), Viral Hepatitis, Sexually Transmitted Disease (STD), and Tuberculosis (TB) Prevention

• National Center for Immunization and Respiratory Diseases

• National Center for Injury Prevention and Control

• National Center for State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce

• National Institute for Occupational Safety and Health

The Director of CDC is also the Administrator for the Agency for Toxic Substances and Disease Registry (ATSDR). ATSDR is a separate operating division under HHS but is managed within CDC.

These Centers, Institute, and Offices (CIOs) implements CDC s public health programs within their areas of expertise.

Throughout fiscal year (FY) 2023, CDC’s Moving Forward initiative focused on engaging senior leaders and staff across the agency in [prioritizing key areas of work](https://intranet.cdc.gov/cdc-moving-forward/priority-action-teams.html) and establishing goals and objectives, and actively supporting development of action plans to address various operations, systems, and processes. The CDC Director and leadership team held regular webinars to update and facilitate discussion with staff on topics related to enterprise-wide career development opportunities, organizational policy and partnerships, legislative affairs, health equity, and diversity, equity, inclusion, accessibility, and belonging (DEIAB) and equal employment opportunity (EEO) efforts.

Since CDC’s declaration of racism being a serious public health threat in April 2021 and the publishing of its 2022 – 2027 Strategic Plan in FY 2022, the agency continued to prioritize and embed DEIAB and EEO into the fabric of the agency.

## **Maintaining a Model EEO Program**

Management Directive 715 is the policy guidance that the U.S. Equal Employment Opportunity Commission’s (EEOC) provides to all federal agencies for their use in establishing and maintaining effective programs of EEO. Additionally, the directive also requires regular evaluation of employment practices within the employee life cycle (i.e., recruitment, hiring, separation, etc.) to identify and eliminate barriers that hamper the advancement of any protected classes against six essential elements. Highlights of CDC’s accomplishments, deficiencies, and areas for improvement for FY 2023 are as follows:

Essential Element A: Demonstrated Commitment from Agency Leadership

Management Directive 715 is the policy guidance that the U.S. Equal Employment Opportunity Commission’s (EEOC) provides to all federal agencies for their use in establishing and maintaining effective programs of EEO. Additionally, the directive also requires regular evaluation of employment practices within the employee life cycle (i.e., recruitment, hiring, separation, etc.) to identify and eliminate barriers that hamper the advancement of any protected classes against six essential elements. Highlights of CDC’s accomplishments, deficiencies, and areas for improvement for FY 2023 are as follows:

CDC is committed to EEO adherence to achieve a diverse workforce that reflects the constituencies it serves and providing every employee, staff member, and potential applicant a safe and inclusive working environment free from discrimination and harassment. On September 29, 2023, the newly-appointed CDC Director and ATSDR Administrator, Mandy K. Cohen, MD, MPH issued the agency’s annual Equal Employment Opportunity policy statement.

* CDC’s Anti-Harassment Policy, which replaced the policy statement, provides guidance on preventing, identifying, and responding to acts of harassment by employees. It is intended to ensure that CDC is taking all necessary steps to prevent harassing conduct in the workplace, and to correct harassing conduct that does occur before it becomes severe or pervasive.
* On February 21, 2023, CDC announced a new organizational structure and as a result, the Office of Health Equity (OHE) was created. OHE’s mission is to ensure health equity is embedded in an all-of-public health approach to overcoming persistent health disparities and health inequities across a range of population groups that disproportionately experience poor health outcomes. It should be noted that five full time equivalents (FTEs) were reassigned from the Office of Equal Employment Opportunity and Workplace Equity (OEEOWE) to include the Chief Diversity Office and one (1) Chief Disability Officer added to OHE’s table of organization.
* From August 8 until October 14, 2022, CDC employees, in partnership with HHS, were invited to complete the Workforce Demographic Survey. During this time, FTEs and U.S. Public Health Service (PHS) Commissioned Corp Officers were encouraged to self-identify their ethnicity, race, sex, disability status, sexual orientation, gender identity, and veteran status. Furthermore, 41.35% of all eligible participants completed the survey – one of the highest participation rates within HHS. CDC’s workforce participation rate updates include the number of Persons with Disabilities (PWDs) increased by 30% (to 20.6% of permanent and temporary civil service employees), and the number of Hispanics/Latinos increased by 61% (to 5.2% of permanent and temporary civil service employees). The overall results will inform CDC’s hiring practices, programs, and how it creates future opportunities for the entire workforce.
* As part of CDC’s employee engagement strategy to continuously seek actionable data concerning the health and wellbeing of its workforce, an employee pulse survey was conducted between April 3 and April 14, 2023 in partnership with HHS and Office of Personnel Management (OPM). A total of 4,812 surveys were completed out of 12,914 administered resulting in a 37.3% response rate. Sixty six percent (66%) of respondents were non-supervisors. The spring 2023 survey reflected that 82% of respondents feel their supervisor cares about employee’s well-being. This remained consisted with the fall survey at 81%.
* The 2023 Federal Employee Viewpoint Survey (FEVS) was available between May 15 through July 14, 2023. A total of 9,299 surveys were completed out of 12,668 administered resulting in a 73.4% response rate. The 2023 results revealed the following responses:
* Employee Engagement Index: 78.3%
* Employee Experience Index: 81.0%
* Global Satisfaction Index: 71.8%
* Belief in Action Indicator 61.2%
* Performance Confidence Index: 90.7%
* Diversity, Equity, Inclusion, Accessibility Index: 78.1%
* Following an OPM Organizational Climate Assessment and Structural Review, OEEOWE completed an organizational restructure in June 2023. As a result, three new positions were created to improve operational efficiency and customer experience – one (1) Senior Advisor, one (1) Associate Director for Strategy and Business Operations, and one (1) Associate Director for EEO Programs. Additionally, OEEOWE published a new framework to enhance awareness of its mission in order to:
* Engage staff
* Monitor data
* Prevent discrimination
* Resolve conflict
* Facilitate complaints
* Support CDC’s workforce throughout the employment lifecycle

* CDC is committed to creating a science, technology, engineering, and mathematics (STEM) workforce for public health that reflects the diversity of cultures, identities, perspectives, approaches, and competencies represented across the United States. These efforts include increasing CDC’s reach and strengthening partnerships with academic institutions and organizations that serve marginalized populations. During FY 2023, CDC’s leadership joined the University of Texas Health San Antonio (UTHSA) Graduate School of Biomedical Sciences and the local chapter of the Society for Advancement of Chicanos/Hispanics & Native Americans in Science (SACNAS) leaders in a panel discussion on the importance of increasing diversity in STEM disciplines that form the foundation for careers in public health.
* The OEEOWE Director and leadership team utilized multiple channels of communication to maintain engagement with managers, supervisors, and employees through a bi-monthly OEEOWE Insider and OEEOWE Journal newsletters, internal communications site CDC Today, and other forms of direct messaging to provide information on trainings, Special Emphasis Programs (SEP), and other OEEOWE efforts, initiatives, and outcomes.
* Additionally, throughout the 4th quarter of FY 2023, the EEO Director and leadership team launched the OEEOWE Leadership Engagement Briefing Series. During this time, OEEOWE's executive staff met with each CIO and Business Service Office (BSO) to discuss organizational-specific workforce and EEO trend data, EEO-related topics, DEIAB initiatives, Barrier Analysis, and CIO Assessment and Scorecard findings.
* CDC’s Diversity and Inclusion Executive Steering Committee (DIESC) was established to oversee agency-wide commitments to a work environment and organizational culture that fosters inclusion, fairness, and equity. Throughout FY 2023, the DIESC led roundtable discussions to connect CIO efforts to the FY 2022 - 2024 CDC DEIAB Strategic Plan and highlight CDC’s accomplishments in DEIAB engagement, strategy, and communications.
* CDC continued its efforts to increase manager and supervisor compliance with mandatory EEO/DEIAB trainings: Workforce Awareness: Diversity, and Inclusion, Unconscious Bias, and Microaggressions, and maintained three mandatory trainings released in prior years: No FEAR Act, The Federal EEO Administrative Compliant Process, Harassment Prevention: A Commonsense Approach for Managers.
* 78% of all managers/supervisors have completed the mandatory Harassment Prevention: A Commonsense Approach for Managers training (16% increase from FY 2022)
* 87% of all managers/supervisors have completed The Federal EEO Administrative Complaint Process training (no change from FY 2022)
* 71% of all employees completed The No Fear Act training (82% increase from FY 2022)
* 73% of all managers/supervisors have completed Workforce Awareness, Diversity and Inclusion, Unconscious Bias, and Microaggressions training (18% decrease from FY 2022)

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

* On October 12, 2023, the OEEOWE Director presented the mandatory FY 2023 State of the Agency address to CDC executive leaders and partners. The briefing was structured as an opportunity for the OEEOWE Director to provide information and to facilitate discussion about CDC’s progress towards being an employer of choice and serving as a model EEO program. The OEEOWE Director and Program Managers continued monthly meetings with agency DEIAB Councils, EEO Advisory Group (EEOAG), and the DIESC to share pertinent information, facilitate collaboration, and address questions and concerns directly.
* In alignment with CDC’s DEIAB Strategic Action Plan and the Government-wide Strategic Plan to Advance DEIA in the Federal Workforce, CDC’s Antiracism and Health Sprint Team was formed in September 2022. Throughout FY 2023, the team focused on strengthening institutional subject matter expertise and equity infrastructure by developing guidance on racially equitable standards, policies, and practices related to science, data, finance, communications, and community engagement.
* In March 2023, CDC published its CDC and ATSDR 2022-2026 Strategic Recruitment and Outreach Plan to ensure the agency has identified strategies to attract highly talented individuals within its workforce. The plan reaffirms that effective recruitment engages a host of internal and external partners to pursue collaborative activities for:
	+ Improving human capital strategies
	+ Sharing information on employment opportunities
	+ Building talent pipelines through non-traditional avenues, (i.e., LinkedIn, Yello, Handshake, etc.)
	+ Environmental scanning to create processes for talent scouting
	+ Incorporating DEIAB practices during resume reviews
	+ Providing best practices in assembling diverse interview panels
	+ Standardizing debriefing procedures for hiring managers and interviewers to promote objective decision-making (i.e., merit promotion principles, fair hiring, unconscious bias training, and utilizing the diversity hiring tool)
* OHE’s Internal Strategic Plan, July 2023 - December 2024 was published during the reporting period. The plan’s mission is to ensure health equity is embedded in an all-of-public health approach to overcoming persistent health disparities and health inequities across a range of population groups that disproportionately experience poor health outcomes. Part of the plan includes a strategy to build CDC’s internal capacity of subject matter expertise in health equity within a workforce and workplace of diversity, equity, inclusion, accessibility, and belonging by doing the following:
	+ Launch workforce health equity learning plan.
* Conduct a knowledge, skills, and abilities workforce needs assessment to assess health equity competencies and develop a capacity-building plan.
* Enhance support and technical assistance to fellowship programs that aim to diversify the public health workforce.
* Implement DEIAB Action Plan and Affirmative Employment Program (AEP) Scorecard recommendations.
* In FY 2023, CDC published its FY 2023 – 2024 CDC Enterprise Learning and Development Strategy to ensure the professional development of its workforce, assisting the organization in providing better services, and retaining its best employees. This plan is designed to focus on the employee lifecycle and ensures that staff develop the necessary competencies to be successful in their positions while positively impacting the agency's mission.
* During this reporting period, CDC developed and published the 2023-2024 CDC Employee Engagement Strategic Plan to maintain a considerate and respectful work environment where all employees feel connected and valued and have opportunity for growth and success. The guiding principles within this plan are grounded in the three psychological conditions necessary for employees to become fully engaged: having a reason to engage, a work environment where employees experience freedom and safety to engage and having the capacity to engage. Furthermore, DEIAB core principles are integral elements of the employee engagement guiding principles.
* CDC continued to create an office environment built on respect for all staff by embedding DEIAB principles throughout its workforce and workplace. Each CIO is committed to building an inclusive workforce comprised of uniquely talented individuals from all sectors of the US population that address the marginalization of historically underrepresented groups across varying organizational levels by developing and publishing DEIAB Action Plans. These living documents showcase how each CIO defines and measures success for achieving their respective DEIAB goals.
* During FY 2023, CDC launched its one hour “Navigating the Federal Hiring Process” Lunch and Learn series. Thirty-three webinars were conducted in which 4,300 participants obtained information related to USAJobs, resume writing best practices and interview tips.

Essential Element C: Management and Program Accountability

* During FY 2023, CDC contributed to HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC Level 2 and Level 4 supervisors and highly encouraged for non-supervisory staff.
* CDC trained over 16,500 non-supervisory and supervisory employees in EEO/DEIAB topics via live virtual (Zoom/ Microsoft Teams) and self-paced e-learning delivery methods.
* Throughout FY 2023, CDC maintained engagement with managers and supervisors to enhance awareness and fulfillment of their roles and responsibilities for EEO and DEIAB, including the following:
* The successful launch of two eLearning courses – Unconscious Bias and Interview Compliance; and Fair Hiring Practicing.
* Conducted year-round trainings for managers and supervisors on conflict management, EEO complaints process, mediation, team building, effective communication, and statutory and legal authorities regarding reasonable accommodations (RA). Over 1,283 managers and supervisors participated in these learning opportunities during the year.
* Since OEEOWE’s AEP CIO Assessment and Scorecard’s launch in FY 2022, CDC published its findings in FY 2023. OEEOWE’s AEP Team administers the CIO assessments annually to establish and maintain accountability for affirmative programs of EEO. The assessment identifies workplace policies, practices, procedures, and conditions that may prevent equal opportunity in the workplace. This allows CDC to enhance accountability and advance towards building a model EEO program. Across all CIOs, the CDC scored an average of 71 out of 100 total points, making the agency an AEP Contender. To determine a CIO’s scorecard category, OEEOWE conducts the following steps:
* Reviews questionnaire responses and documentation
* Scores the CIOs on each of the six essential elements of a model EEO program
* Calculates a total score by adding the scores from the six essential elements
* Assigns the CIOs one of three categories based on the total score
* AEP Champion – the CIO has demonstrated knowledge; excelled and implemented efforts to affirmative employment compliance and creating a DEIAB culture within the organization (Scoring: 80 – 100 points)
* AEP Contender – the CIO has demonstrated knowledge; achieved and implemented some efforts to commit to affirmative employment compliance and created a DEIAB culture within the CIO (Scoring: 50 – 79 points)
* AEP Novice – the CIO demonstrated needs for improvement concerning affirmative employment compliance and creating the DEIAB culture within the CIO (Scoring: 49 points or less)
* In FY 2023, 48% of all CIOs were identified as AEP Champions, 28% as AEP Contenders, and 24% AEP Novices.

Essential Element D: Proactive Prevention of Unlawful Discrimination

* On November 3, 2022, CDC held its first American Indian, Alaska Native, and Native Hawaiian Career Expo to provide future job applicants with opportunities to engage with leaders and learn more about CDC. This expo was part of a series of recruitment events hosted by CDC and special interest groups to identify career opportunities to inspire diverse communities to join CDC’s workforce. Of the 287 registrants, 140 participated in the event in which one attendee was hired through the use of the Schedule A hiring authority.
* On December 6, 2022, CDC welcomed author Baynard Woods to discuss his journey to uncovering the meaning of whiteness to its workforce. During the seminar entitled "Inheritance: An Autobiography of Whiteness Seminar," he discussed how his insights have helped inform public health efforts around DEIAB and explains his experience of how he and his family have benefitted from structural racism. He went on to say, “We’ve all been infected by this, almost in a public health way and we have to figure out a way to deal with it. Here’s been my experience and let’s start talking from there. These are things in the culture that we need to start redressing.”
* In April 2023, CDC recognized Celebrate Diversity Month to celebrate the beauty of all unique cultures, backgrounds, and traditions. The agency highlighted various resources, to include virtual and self-paced training opportunities that commemorate diversity, educate on inclusivity, and provide opportunities to experience the differences that make everyone unique.
* CDC’s Celebration of CORE: Making the Health Equity (HE), DEIAB and EEO Connection forum was held May 2 - 4, 2023. The forum was a unique opportunity to applaud and promote diversity, health equity, and learn about the connections between CORE, DEIAB, and health equity. The theme of the event was Inspire. Transform. Act. Inspire. Transform. Act.
* Inspire CDC personnel to engage in the health equity and DEIAB Strategies;
* Transform CDC’s strategic positioning, science, and programming to center DEIAB and health equity; and equip CDC personnel with the tools, resources, and opportunities to
* Act by advancing DEIAB and HE initiatives toward a more inclusive and equitable workplace.

Over 1,000 attendees took part in trainings, panel discussions, and CORE-focused sessions around DEIAB and health equity best practices shared by CDC leaders, diversity council members, and employee organizations including four keynote speaker addresses. The event also featured the first DEIAB and EEO Workplace Equity Innovation Award. The purpose of this award is to recognize the dedication and commitment of CDC employees who have increased awareness and/or implemented activities to advance DEIAB, EEO, or Workplace Equity through breaking barriers, advancing through innovation, building a diverse and inclusive workforce, ensuring accountability and/or building internal or external collaborations in 2022.

* In May 2023, CDC launched its CareerReady Program for its employees. This program is an enterprise-wide talent management and career development framework consisting of three primary components:
* Centralized Governance: Reporting to the Executive Board, the Workforce Governance Board provides strategic oversight to existing and emerging workforce development initiatives.
* Career Communities: These are job series groupings with functionally based leadership created to universally develop the CDC workforce. Every employee will be aligned to a community based on their job series. The 10 Career Communities are:
* Communications and Administration
* Information and Data Science
* Human Resources, Education, and Training
* Public Health Program
* Medical and Veterinary
* Health Science
* Finance, Business, and Contracting
* Biological and Physical Science (Laboratory)
* Safety, Security, Facilities, and Engineering
* Legal
* The CareerReady Program Center of Expertise (CRP CoE): The CoE is made up of the Career Ready Program Office, CDC University, and the Career Community Support Teams (CCSTs), was created to institute a cross-cutting, enterprise- wide approach to address CDC’s workforce development needs.

Tailored to CDC’s unique global mission and workforce, CareerReady equips employees to identify their competency needs and leverage training, developmental and experiential opportunities to build their own career path, while providing enterprise- wide career and development guidance for the Career Communities.

* On August 1, 2023, CDC launched its initial pilot in support of the agency’s Diverse Hiring Panels Initiative, which introduces an automated and standardized enterprise system for generating resume review and interview panels. Through the use of a proven algorithm, the automated Hiring Generator reconciles a hiring manager’s need for panel participants with various diverse attributes of qualified potential panelists to recommend a diverse group of panelists. The Federal Merits Systems Overview, Interview Compliance and Fair Hiring, and Unconscious Bias courses were training requirements for all participating hiring managers and panelists.
* Over 2,330 staff opted in to participate in the pilot.
* 560 potential panelists were identified from the 158 different panels generated.
* Generated panels were more diverse than the CDC employee population.

On September 20, 2023, CDC staff, including HBCU alumni and friends, gathered at the 2023 CDC National HBCU Week Recognition Program. Attendees celebrated the legacy of HBCUs and promoted partnerships with public health. The program’s theme was Raising the Bar: Forging Excellence through Innovation and Leadership in which Leonard Jack, Jr., PhD, MSc served as the keynote speaker. During the program, the inaugural CDC/ATSDR HBCU Distinguished Alumni Award was presented to the recipient for their outstanding leadership, public health scholarship, and public service. This is a prestigious honor recognizing those whose CDC career accomplishments have honored the legacy of excellence and service at the agency.

* In FY 2023, CDC updated its Requests for Reasonable Accommodation (RA) Policy. The updated policy reaffirms CDC’s commitment to providing RA to its employees and applicants for employment to help ensure that individuals with disabilities enjoy equal access to employment opportunities. The policy has been updated to reflect changes in the EEOC policies and best practices to be in alignment with the Americans with Disabilities Act Amendments Act of 2008. Revisions include updated language on the definition of disability, standardized requirements for personal assistance during travel, integration of the Accommodation Tracking System, and provision of Communication Access Real-Time Translation (CART) services.
* CDC is committed to promoting a high-performing workforce, identifying and closing skills gaps, implementing and maintaining programs to attract, acquire, develop, promote, and retain quality and diverse talent. In FY 2023, CDC announced a new leadership development pilot program called Learn and Lead: Developing Transformational Leaders. This pilot program, in which 169 CDC employees participated, is aimed at developing foundational leadership competencies in CDC FTEs at the GS-5 through GS-11 pay grades. One of the primary goals of the pilot is to provide CDC with data to help inform the rollout of an enterprise-wide leadership development initiative that will be available to all GS-05-11 and equivalent CDC FTEs. Additionally, CDC seeks to expose its employees to leadership principles early in their career to deliberately grow its workforce throughout the employee lifecycle. This effort is aligned with the agency's commitment to making appropriate changes to structures, systems, policies and/or processes to ensure CDC is DEIAB into all it does.
* Throughout FY 2023, CDC coordinated and participated in a total of 83 recruitment events in which:
* 13 were conducted virtually that resulted in over 1,022 contacts
* One (1) event targeted persons with disabilities yielding 97 contacts
* One (1) event targeted veterans with disabilities yielding 93 contacts.
* Resulted in 7,692 total contacts.
* Because CDC is committed to building, shaping, and retaining a highly-skilled and innovative workforce that reflects the diverse experiences and perspectives of the American people, the agency began using the online talent acquisition platform, Yello, in FY 2023. During this reporting period, CDC managed five live events through Yello that resulted in 56 contacts.
* During FY 2023, CDC welcomed its Morehouse School of Medicine Internship Program participants. This program was established to increase and diversify CDC's workforce pipeline and offer aspiring public health professionals the chance to learn and work with subject matter experts.
* CDC staff and partners continue to share information about employment and training opportunities through relationships with academic institutions, national professional associations, veteran’s groups, and target community organizations.
* Additionally, the agency continues its collaboration efforts with OPM, HHS, employee resource groups (ERGs), and other external networks to expand the development of CDC outreach, recruitment, and benchmarking opportunities.
* Since the inclusion of ERGs to CDC’s Official Work Groups Policy in FY 2022, +UNIDOS, a Hispanic/Latino Employee Association, became CDC's first approved employee resource group.
* During the reporting period, CDC hosted a DEIAB-focused series for its workforce to discuss the following:
* February 2, 2023: Leading Organizational Transformations: Diversity, Racial Equity & Inclusion Training explored how racism impedes the ability to effectively address racial and ethnic health inequities in America. The purpose of the training is to increase the awareness and competency of CDC staff in DEIAB using the lens of the economic and social impact of racism.
* June 1, 2023: Moving towards Actionable Health Equity Work: CDC’s Health Equity Intervention and Action Principles provided an overview of CDC’s Health Intervention and Action Principles, the newest addition to the portfolio of tools within CDC’s CORE Commitment to Health Equity. The Health Equity Intervention and Action Principles provide a framework for organizations and interventions to foster a culture and environment that promotes health equity.
* September 21, 2023: The Power of Belonging: Understanding Ableism and Why Addressing It Matters speakers shared ways to value and elevate the lived experiences of people with disabilities and amplify disability inclusion in all aspects of public health.
* CDC partnered with Employee Organizations throughout FY 2023 to advance the needs of underrepresented populations within its workforce and developed programs and events to celebrate the many diverse cultures represented across the agency through SEP. These celebrations enhance over 3,527 attendees’ awareness about the historical and organizational contributions of various genders, ethnic, and cultural groups, and serve to improve the workplace environment by promoting and fostering diversity, sensitivity, and awareness.
* Rev. Dr. Martin Luther King, Jr. Commemorative Celebration (January 2023)- It Starts with Me: Cultivating a Beloved Community Mindset to Transform Unjust Systems with guest speaker Kaleth O. Wright; Chief Executive Officer, Air Force Society
* African American History Month (February 2023) - Black Resistance
* A Conversation with Former Negro Baseball League Baseball Player Dennis Biddle
* A Conversation with Dr. Paris Butler, Associate Professor in the Division of Plastic Surgery at Yale University School of Medicine and Vice Chair of Diversity, Equity, and Inclusion (DEI) at Yale Department of Surgery
* Women’s History Month (March 2023) - Celebrating Women Who Tell Our Stories
* Keynote speaker, Dr. Talithia Williams discussed her experience as a woman of color in the STEM field, and the importance of data when trying to understand social determinants of health.
* Asian American, Native Hawaiian, and Pacific Islander Heritage Month (May 2023): Advancing Leaders Through Opportunity
* Panel Discussion with Juliet K. Choi, JD, President, and Chief Executive Officer, Asian & Pacific Islander American Health Forum (APIAHF) and Monica Valdes Lupi, JD, MPH, Managing Director of the Kresge Foundation’s Health Program.
* Sexual and Gender Minority (often known as LGBTQ+)1 Pride Month (June 2023): Building Communities of Belonging
* CURED is an American documentary film that profiles the fight of the LGBTQ+ community against the American Psychiatric Association and others within the psychiatric community to end the inhumane “medical treatment” for homosexuality and to declassify homosexuality as a mental disorder that needs to be “cured.” Panelist: Patrick Sammon, Co-Director of CURED and Reverend Magora Kennedy, civil rights activist.
* Hispanic Heritage Month (September 15 – October 15): Todos Somos, Somos Uno: We are All, We are One
* Keynote speaker, Lili Valletta provided data to understand the influence of artificial intelligence (AI), cultural intelligence, and marketing on the social determinants of health and health equity. Lili discussed her thoughts on what CDC can do to integrate the country’s evolving demographics, policy dynamics, value-based models, and marketing into programs and initiatives that improve the nation’s health and promote societal impact.
* National Disability Employment Awareness Month (NDEAM) (October): NDEAM 2022 Summit, Disability: Part of the Equity Equation

[1] LGBTQIA+ stands for lesbian, gay, bisexual, transgender, queer (or sometimes questioning), intersex, asexual, and others.

* CDC highlighted various offices across the agency, who support PWDs to create equitable workplace and equal employment opportunities at the agency.

Essential Element E: Efficiency

* CDC's EEO programs maintained a focus on efficiency, effectiveness, and innovation throughout the reporting period with most services provided using virtual platforms.
* The EEO Complaints Team managed 123 EEO contacts, 85 informal complaints/counseling sessions, 36 formal EEO complaints, trained over 400 employees on the EEO complaint process, and developed an inaugural EEO 462 executive summary for CDC leadership. In FY 2023, the top three basis for complaints were race, disability, and reprisal. It should be noted that the EEO Complaints Team achieved 100% compliance with pre-compliant counseling requirements, completed 100% of formal investigations within the required 180 or 360 days, and improved the case issuance acceptance letters/ dismissals turnaround by 33% (from 20 days to 15 days).
* The RA Team managed 439 requests in FY 2023, with 95% closed within 60 days of receiving qualifying information. The top three accommodations provided were modified work schedules (I.e., telework, flex tour/time, etc.), equipment (sit/ stand, chairs, mouse, software, etc.), and other than coach class travel. The RA team, in partnership with the Office of Safety, Security, and Asset Management (OSSAM), streamlined the process for providing software and assistive equipment and maintaining a stock of 24”, 32”, and 43”, monitors to support RA requests. In addition to responding to 827 email inquiries within 24 hours, the RA Team's Accommodation Tracking System (ATS) enhancements to include reporting features, streamlined the “supervisor’s” tab, added an “equipment” tab that tracks expenditures, and included case history.
* The Alternative Dispute Resolution Team provided consultative services on 142 cases and received 91 requests for mediation in FY 2023 which is 5.88% increase from FY 2022. During the reporting period, 38 mediation cases were received directly from an employee and not associated with a grievance or EEO complaint while 36 originated from the EEO process. The consults ranged from a one-time contact to explain the ADR process, to multiple contacts over weeks or months to support managers and employees on a wide variety of issues and conflict resolution techniques. In FY 2023, the top three issues in mediation were:
* Issues with supervisor
* Performance Management Appraisal Program (PMAP)
* Harassment

Essential Element F: Responsiveness and Legal Compliance

* Throughout FY 2023, CDC implemented its enhanced enterprise-wide barrier analysis (BA) data collection process. Additionally, the BA Workgroup completed its trigger identification phase that focused on the inclusion in higher grades (GS-13 and above) for the following reasons:
* Prior barrier analysis results related to:
* Black and Asian Women
* Hispanics and Latinos
* Workforce data trends to include applicant flow data
* Trigger identification findings
* In FY 2023, CDC experienced a 5.88% increase in ADR cases, 41.47% decrease in RA requests2, and 30% increase in new formal EEO complaints when compared to FY 2022. All programs exceeded benchmarks for timely and full compliance with EEOC regulations, settlement agreements, and other orders for processes and procedures managed at CDC.
* CDC complied with all reporting requirements, including timely submission of the annual Disabled Veterans Affirmative Action Program (DVAAP) report, the annual Federal Equal Opportunity Recruitment Program (FEORP) report, and quarterly publication of Notification and Federal Employee Antidiscrimination and Retaliation Act (No FEAR Act) data.
* The HHS EEODI Director is responsible for the issuance of final agency decisions (FADs) for all Operating Divisions within HHS. In FY 2023, HHS implemented a backlog reduction plan to eliminate cases identified as exceeding the statutory timeframes under 29 C.F.R Section 1614. The backlog reduction plan has been a two -step process. The first part required the Department to address all new cases ripe for adjudication within their statutory timeframes of 60 or 45 days of election/notice to CAD. The second part required the resolution of the FADs in the backlog by priority levels. As a result of this plan implementation, there has been an 81% reduction of the FAD backlog. HHS is working towards the elimination of the remaining 19% of cases on or before December 31, 2023.

HHS has continued to increase its FAD issuances each year. Over the past 3 years, HHS has issued over 300 FADs. This includes 162 merit FADs issued in FY 2023, 138 merit FADs in FY 2022; and 26 Merit FADs in FY 2021.

Through the efficient and thorough processing of the final agency decision backlog, HHS issued over 162 FADs during the course of FY 2023. HHS has continued to address and remove internal barriers hindering the issuance of FADs by eliminating processing redundancies, fully staffing its adjudication specialist positions, and leveraging alternative staffing resources, to address FADs in a more timely and efficient manner.

[2] Requests included Medical and Religious Vaccine Exemptions

Please refer to supporting document entitled CDC FY 2023 MD 715 Report Part E Workforce Data Addendum

Accomplishments reported throughout Part E.2.

## **Planned Activities**

In FY 2024, CDC will continue initiatives started in previous years and expand efforts to:

* Launch CDC’s Diversity, Equity, and Engagement Executive Steering Committee (DEEESC). This committee will strengthen CDC’s commitment to EEO protections at the enterprise level.
* Enhance and automate the CIO assessment questionnaire and scorecard process. These findings will inform the barrier analysis process and assist CIO’s in identifying gaps in their policies, processes, and procedure that create barriers to equal employment and DEIAB.
* Complete the current enterprise-wide barrier analysis initiative, develop report of findings and recommendations, and publish action plans.
* Enhance and strengthen targeted outreach with minority-serving institutions (MSIs) and high schools.
* Establish an EEO Community of Practice.
* Develop CDC's EEO FY 2025-2027 Strategic Plan in alignment with current and new EEOC and other federal requirements.
* Finalize and publish CDC’s ADR and EEO operational policies.

**Essential Element A: Demonstrated Commitment From agency Leadership
This element requires the agency head to communicate a commitment to equal employment opportunity and a discrimination-free workplace.**

Table A1 - Demonstrated Commitment from Agency Leadership

| Right arrow**Compliance Indicator**down arrow**Measures** | **A.1 – The agency issues an effective, up-to-date EEO policy statement** | **Measure Me?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **A.1.a** | Does the agency annually issue a signed and dated EEO policy statement on agency letterhead that clearly communicates the agency’s commitment to EEO for all employees and applicants? If “yes”, please provide the annual issuance date in the comment’s column. [see MD-715, II(A)] | Yes | 9/29/20239/29/2023 |
| **A.1.b** | Does the EEO policy statement address all protected bases (age, color, disability, sex (including pregnancy, sexual orientation and gender identity), genetic information, national origin, race, religion, and reprisal) contained in the laws EEOC enforces?[see 29 CFR § 1614.101(a)]  | Yes |  |

Table A2 - Demonstrated Commitment from Agency Leadership

| Right arrow**Compliance Indicator**down arrow**Measures** | **A.2 – The agency has communicated EEO policies and procedures to all employees.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **A.2.a** | Does the agency disseminate the following policies and procedures to all employees: | Yes |  |
| **A.2.a.1** | Anti-harassment policy? [see MD 715, II(A)]  | Yes |  |
| **A.2.a.2** | Reasonable accommodation procedures? [see 29 C.F.R § 1614.203(d)(3)] | Yes |  |
| **A.2.b** | Does the agency prominently post the following information throughout the workplace and on its public website: |  |  |
| **A.2.b.1** | The business contact information for its EEO Counselors, EEO Officers, Special Emphasis Program Managers, and EEO Director? [see 29 C.F.R § 1614.102(b)(7)] | Yes |  |
| **A.2.b.2** | Written materials concerning the EEO program, laws, policy statements, and the operation of the EEO complaint process? [see 29 C.F.R § 1614.102(b)(5)] | Yes |  |
| **A.2.b.3** | Reasonable accommodation procedures? [see 29 C.F.R. § 1614.203(d)(3)(i)] If so, please provide the internet address in the comments column. | Yes | <https://www.cdc.gov/eeo/ra/ra.htm>  |
| **A.2.c** | Does the agency inform its employees about the following topics: |  |  |
| **A.2.c.1** | EEO complaint process? [see 29 CFR §§ 1614.102(a)(12) and 1614.102(b)(5)] If “yes”, please provide how often. | Yes | Posted on Intranet (continually); New Employee Orientation (bi- weekly); Supervisory Basic Employee Relations training (quarterly); training for employees throughout the year. |
| **A.2.c.2** | ADR process? [see MD-110, Ch. 3(II)©] If “yes”, please provide how often.  | Yes | New Employee Orientation (bi- weekly); Supervisory Basic Employee Relations training (quarterly); training for employees throughout the year. |
| **A.2.c.3** | Reasonable accommodation program? [see 29 CFR § 1614.203(d)(7)(ii)©] If “yes”, please provide how often.  | Yes | Posted on Intranet (continually); New Employee Orientation (bi- weekly); Supervisory Basic Employee Relations training (quarterly); training for all employees throughout the year. |
| **A.2.c.4** | Anti-harassment program? [see EEOC Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (1999), § V.C.1] If “yes”, please provide how often. | Yes | Posted on Intranet (continually) and required for all managers and supervisors every two years. |
| **A.2.c.5** | Behaviors that are inappropriate in the workplace and could result in disciplinary action? [5 CFR § 2635.101(b)] If “yes”, please provide how often. | Yes | Posted on Intranet (continually); New Employee Orientation (bi- weekly); Supervisory Basic Employee Relations training (quarterly); training for all employees throughout the year. |

Table A3 - Demonstrated Commitment from Agency Leadership

| right arrow**Compliance Indicator** down arrow**Measures** | **A.3 – The agency assesses and ensures EEO principles are part of its culture.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **A.3.a** | Does the agency provide recognition to employees, supervisors, managers, and units demonstrating superior accomplishment in equal employment opportunity? [see 29 CFR § 1614.102(a) (9)] If “yes”, provide one or two examples in the comments section. | Yes | The Better Together websiteis an internalplatform forsharing DEIABwork, individualand groupaccomplishments,and best practicesacross CDC. TheCDC HonorAward forExcellence inHuman CapitalManagement –WorkforceDiversityrecognizes andhighlights notableand significantachievementseach calendaryear. |
| **A.3.b** | Does the agency utilize the Federal Employee Viewpoint Survey or other climate assessment tools to monitor the perception of EEO principles within the workforce? [see 5 CFR Part 250] | Yes | None |

**Essential Element B: Integration of EEO into the agency’s Strategic Mission
This element requires that the agency’s EEO programs are structured to maintain a workplace that is free from discrimination and support the agency’s strategic mission.**

Table B1 -Integration of OEEO into the Agency’s Strategic Mission

| right arrow**Compliance Indicator** downarrow**Measures** | **B.1 - The reporting structure for the EEO program provides the principal EEO official with appropriate authority and resources to effectively carry out a successful EEO program.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **B.1.a** | Is the agency head the immediate supervisor of the person (“EEO Director”) who has day-to-day control over the EEO office? [see 29 CFR §1614.102(b)(4)] | No |  |
| **B.1.a.1** | If the EEO Director does not report to the agency head, does the EEO Director report to the same agency head designee as the mission-related programmatic offices? If “yes,” please provide the title of the agency head designee in the comments. | Yes | EEO Director works day-to-day with the CDC Director. This is similar to CDC programs who work day-to-day with the PrincipalDeputy. |
| **B.1.a.2** | Does the agency’s organizational chart clearly define the reporting structure for the EEO office? [see 29 CFR §1614.102(b)(4)] | Yes | None |
| **B.1.b** | Does the EEO Director have a regular and effective means of advising the agency head and other senior management officials of the effectiveness, efficiency and legal compliance of the agency’s EEO program?[see 29 CFR §1614.102(c)(1); MD-715 Instructions, Sec. I] | Yes | None |
| **B.1.c** | During this reporting period, did the EEO Director present to the head of the agency, and other senior management officials, the "State of the agency" briefing covering the six essential elements of the model EEO program and the status of the barrier analysis process? [see MD-715 Instructions, Sec. I)] If “yes”, please provide the date of the briefing in the comments column.  | Yes | October 12, 2023 |
| **B.1.d** | Does the EEO Director regularly participate in senior-level staff meetings concerning personnel, budget, technology, and other workforce issues? [see MD-715, II(B)] | Yes | None |

Table B2 – Integration of OEEO into the Agency’s Strategic Mission

| right arrow**Compliance Indicator**down arrow**Measures** | **B.2 – The EEO Director controls all aspects of the EEO program.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **B.2.a** | Is the EEO Director responsible for the implementation of a continuing affirmative employment program to promote EEO and to identify and eliminate discriminatory policies, procedures, and practices? [see MD-110, Ch. 1(III)(A); 29 CFR §1614.102(c)] | Yes | None |
| **B.2.b** | Is the EEO Director responsible for overseeing the completion of EEO counseling [see 29 CFR §1614.102(c)(4)] | Yes | None |
| **B.2.c** | Is the EEO Director responsible for overseeing the fair and thorough investigation of EEO complaints? [see 29 CFR §1614.102(c)(5)] [This question may not be applicable for certain subordinate level components.] | Yes | None |
| **B.2.d** | Is the EEO Director responsible for overseeing the timely issuing final agency decisions? [see 29 CFR §1614.102(c)(5)] [This question may not be applicable for certain subordinate level components.] | N/A | HHS issues Final Agency Decisions for the Department |
| **B.2.e** | Is the EEO Director responsible for ensuring compliance with EEOC orders? [see 29 CFR §§ 1614.102(e); 1614.502] | Yes | None |
| **B.2.f** | Is the EEO Director responsible for periodically evaluating the entire EEO program and providing recommendations for improvement to the agency head? [see 29 CFR §1614.102(c)(2)] | Yes | None |
| **B.2.g** | If the agency has subordinate level components, does the EEO Director provide effective guidance and coordination for the components? [see 29 CFR §§ 1614.102(c)(2) and (c)(3)] | N/A | No subordinate level components |

Table B3 - Integration of OEEO into the Agency’s Strategic Mission

| right arrow**Compliance Indicator** down arrow**Measures** | **B.3 - The EEO Director and other EEO professional staff are involved in, and consulted on, management/personnel actions.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **B.3.a** | Do EEO program officials participate in agency meetings regarding workforce changes that might impact EEO issues, including strategic planning, recruitment strategies, vacancy projections, succession planning, and selections for training/career development opportunities? [see MD-715, II(B)] | Yes | None |
| **B.3.b** | Does the agency’s current strategic plan reference EEO / diversity and inclusion principles? [see MD-715, II(B)] If “yes”, please identify the EEO principles in the strategic plan in the comments column. | Yes | The plan reflects CDC commitment to equity and diversity, including recognition that a diverse, multi- disciplinary workforce will create more inclusive and accessible climates, policies, and practices for broader public health impact. |

Table B4 - Integration of OEEO into the Agency’s Strategic Mission

| right arrow**Compliance Indicator** down arrow**Measures** | **B.4 - The agency has sufficient budget and staffing to support the success of its EEO program.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **B.4.a** | Pursuant to 29 CFR §1614.102(a)(1), has the agency allocated sufficient funding and qualified staffing to successfully implement the EEO program, for the following areas: |  |  |
| **B.4.a.1** | to conduct a self-assessment of the agency for possible program deficiencies? [see MD-715, II(D)] | Yes | None |
| **B.4.a.2** | to enable the agency to conduct a thorough barrier analysis of its workforce? [see MD-715, II(B)] | Yes | None |
| **B.4.a.3** | to timely, thoroughly, and fairly process EEO complaints, including EEO counseling, investigations, final agency decisions, and legal sufficiency reviews? [see 29 CFR § 1614.102(c)(5) & 1614.105(b) – (f); MD-110, Ch. 1(IV)(D) & 5(IV); MD-715, II(E)] | Yes | HHS issues Final Agency Decisions for the Department |
| **B.4.a.4** | to provide all supervisors and employees with training on the EEO program, including but not limited to retaliation, harassment, religious accommodations, disability accommodations, the EEO complaint process, and ADR? [see MD-715, II(B) and III(C)] If not, please identify the type(s) of training with insufficient funding in the comments column.  | Yes | None |
| **B.4.a.5** | to conduct thorough, accurate, and effective field audits of the EEO programs in components and the field offices, if applicable? [see 29 CFR §1614.102(c)(2)] | No | No subordinate level components |
| **B.4.a.6** | to publish and distribute EEO materials (e.g. harassment policies, EEO posters, reasonable accommodations procedures)? [see MD-715, II(B)] | Yes | None |
| **B.4.a.7** | to maintain accurate data collection and tracking systems for the following types of data: complaint tracking, workforce demographics, and applicant flow data? [see MD-715, II(E)]. If not, please identify the systems with insufficient funding in the comments section. | Yes | HHS manages workforce demographic and applicant flow data |
| **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] | Yes | None |
| **B.4.a.9** | to effectively manage its anti-harassment program? [see MD-715 Instructions, Sec. I); EEOC Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (1999), § V.C.1] | Yes |  |
| **B.4.a.10** | to effectively manage its reasonable accommodation program? [see 29 CFR § 1614.203(d)(4)(ii)] | Yes | None |
| **B.4.a.11** | to ensure timely and complete compliance with EEOC orders? [see MD-715, II(E)] | Yes | None |
| **B.4.b** | Does the EEO office have a budget that is separate from other offices within the agency? [see 29 CFR § 1614.102(a)(1)] | Yes | None |
| **B.4.c** | Are the duties and responsibilities of EEO officials clearly defined? [see MD-110, Ch. 1(III)(A), 2(III), & 6(III)] | Yes | None |
| **B.4.d** | Does the agency ensure that all new counselors and investigators, including contractors and collateral duty employees, receive the required 32 hours of training, pursuant to Ch. 2(II)(A) of MD-110? | Yes | None |
| **B.4.e** | Does the agency ensure that all experienced counselors and investigators, including contractors and collateral duty employees, receive the required 8 hours of annual refresher training, pursuant to Ch. 2(II)(C) of MD-110? | Yes | None |

Table B5 - Integration of OEEO into the Agency’s Strategic Mission

| right arrow**Compliance Indicator** down arrow**Measures** | **B.5 – The agency recruits, hires, develops, and retains supervisors and managers who have effective managerial, communications, and interpersonal skills.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **B.5.a** | Pursuant to 29 CFR § 1614.102(a)(5),have all managers and supervisors received training on their responsibilities under the following areas under the agency EEO program: |  |  |
| **B.5.a.1** | EEO Complaint Process? [see MD-715(II)(B)] | Yes | None |
| **B.5.a.2** | Reasonable Accommodation Procedures? [see 29 C.F.R. § 1614.102(d)(3)] | Yes | None |
| **B.5.a.3** | Anti-Harassment Policy? [see MD-715(II)(B)] | Yes |  |
| **B.5.a.4** | Supervisory, managerial, communication, and interpersonal skills in order to supervise most effectively in a workplace with diverse employees and avoid disputes arising from ineffective communications? [see MD-715, II(B)] | Yes | None |
| **B.5.a.5** | ADR, with emphasis on the federal government’s interest in encouraging mutual resolution of disputes and the benefits associated with utilizing ADR? [see MD-715(II)(E)] | Yes | None |

Table B6 - Integration of OEEO into the Agency’s Strategic Mission

| right arrow**Compliance Indicator** downarrow**Measures** | **B.6 – The agency involves managers in the implementation of its EEO program.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **B.6.a** | Are senior managers involved in the implementation of Special Emphasis Programs? [see MD-715 Instructions, Sec. I] | Yes | None |
| **B.6.b** | Do senior managers participate in the barrier analysis process? [see MD-715 Instructions, Sec. I]  | Yes | None |
| **B.6.c** | When barriers are identified, do senior managers assist in developing agency EEO action plans (Part I, Part J, or the Executive Summary)? [see MD-715 Instructions, Sec. I] | Yes | None |
| **B.6.d** | Do senior managers successfully implement EEO Action Plans and incorporate the EEO Action Plan Objectives into agency strategic plans? [29 CFR § 1614.102(a)(5)] | Yes |  |

**Essential Element C:** **Management and Program Accountability
This element requires the agency head to hold all managers, supervisors, and EEO officials responsible for the effective implementation of the agency’s EEO Program and Plan.**

Table C4 -Management and Program Accountability

| right arrow**Compliance Indicator** downarrow**Measures** | **C.1 – The agency conducts regular internal audits of its component and field offices.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **C.1.a** | Does the agency regularly assess its component and field offices for possible EEO program deficiencies?[see 29 CFR §1614.102(c)(2)]If ”yes”, please provide the schedule for conducting audits in the comments section. | NA | No subordinate level components |
| **C.1.b** | Does the agency regularly assess its component and field offices on their efforts to remove barriers from the workplace? [see 29 CFR §1614.102(c)(2)]If ”yes”, please provide the schedule for conducting audits in the comments section. | NA | No subordinate level components |
| **C.1.c** | Do the component and field offices make reasonable efforts to comply with the recommendations of the field audit? [see MD-715, II(C)] | NA | No subordinate level components |

Table 5 - Management and Program Accountability

| right arrow**Compliance Indicator** downarrow**Measures** | **C.2 – The agency has established procedures to prevent all forms of EEO discrimination.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **C.2.a** | Has the agency established comprehensive anti-harassment policy and procedures that comply with EEOC’s enforcement guidance?[see MD-715, II(C); Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (Enforcement Guidance), EEOC No. 915.002, § V.C.1 (June 18, 1999)] | Yes |  |
| **C.2.a.1** | Does the anti-harassment policy require corrective action to prevent or eliminate conduct before it rises to the level of unlawful harassment? [see EEOC Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (1999), § V.C.1] | Yes |  |
| **C.2.a.2** | Has the agency established a firewall between the Anti-Harassment Coordinator and the EEO Director? [see EEOC Report, Model EEO Program Must Have an Effective Anti-Harassment Program (2006] | Yes |  |
| **C.2.a.3** | Does the agency have a separate procedure (outside the EEO complaint process) to address harassment allegations? [see Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (Enforcement Guidance), EEOC No. 915.002, § V.C.1 (June 18, 1999)] | Yes | None |
| **C.2.a.4** | Does the agency ensure that the EEO office informs the anti-harassment program of all EEO counseling activity alleging harassment? [see Enforcement Guidance, V.C.] | Yes | The harassment prevention program is being implemented in FY 2021. |
| **C.2.a.5** | Does the agency conduct a prompt inquiry (beginning within 10 days of notification) of all harassment allegations, including those initially raised in the EEO complaint process? [see Complainant v. Dep’t of Veterans Affairs, EEOC Appeal No. 0120123232 (May 21, 2015); Complainant v. Dep’t of Defense (Defense Commissary Agency), EEOC Appeal No. 0120130331 (May 29, 2015)] If “no”, please provide the percentage of timely-processed inquiries in the comments column. | Yes | Currently, the Workforce Relations Office conducts an inquiry into harassment raised in the EEO complaint process when forwarded to the office.A harassment prevention program is being implemented in FY 2021. |
| **C.2.a.6** | Do the agency’s training materials on its anti-harassment policy include examples of disability-based harassment? [see 29 CFR 1614.203(d)(2)] | Yes | Training is under development and will include examples of disability-based harassment. |
| **C.2.b** | Has the agency established disability reasonable accommodation procedures that comply with EEOC’s regulations and guidance? [see 29 CFR 1614.203(d)(3)] | Yes | None |
| **C.2.b.1** | Is there a designated agency official or other mechanism in place to coordinate or assist with processing requests for disability accommodations throughout the agency? [see 29 CFR 1614.203(d)(3)(D)] | Yes | None |
| **C.2.b.2** | Has the agency established a firewall between the Reasonable Accommodation Program Manager and the EEO Director? [see MD-110, Ch. 1(IV)(A)] | Yes | None |
| **C.2.b.3** | Does the agency ensure that job applicants can request and receive reasonable accommodations during the application and placement processes? [see 29 CFR 1614.203(d)(1)(ii)(B)] | Yes | None |
| **C.2.b.4** | Do the reasonable accommodation procedures clearly state that the agency should process the request within a maximum amount of time (e.g., 20 business days), as established by the agency in its affirmative action plan? [see 29 CFR 1614.203(d)(3)(i)(M)] | Yes | None |
| **C.2.b.5** | Does the agency process all accommodation requests 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 in the comments column. | Yes | None |
| **C.2.c** | Has the agency established procedures for processing requests for personal assistance services that comply with EEOC’s regulations, enforcement guidance, and other applicable executive orders, guidance, and standards? [see 29 CFR 1614.203(d)(6)] | Yes | None |
| **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. | Yes | [https://www.cdc.gov/](https://www.cdc.gov/eeo/ra/policy.htm)[eeo/ra/policy.htm](https://www.cdc.gov/eeo/ra/policy.htm) |

Table C3 - Management and Program Accountability

| right arrow**Compliance Indicator** downarrow**Measures** | **C.3 - The agency evaluates managers and supervisors on their efforts to ensure equal employment opportunity.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **C.3.a** | Pursuant to 29 CFR §1614.102(a)(5), do all managers and supervisors have an element in their performance appraisal that evaluates their commitment to agency EEO policies and principles and their participation in the EEO program? | No | During FY 2023, CDC contributed to HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff effective January 1, 2024 |
| **C.3.b** | Does the agency require rating officials to evaluate the performance of managers and supervisors based on the following activities: |  | None |
| **C.3.b.1** | Resolve EEO problems/disagreements/conflicts, including the participation in ADR proceedings? [see MD-110, Ch. 3.I] | No | During FY 2023, CDC contributedto HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff effective January 1, 2024. |
| **C.3.b.2** | Ensure full cooperation of employees under his/her supervision with EEO officials, such as counselors and investigators? [see 29 CFR §1614.102(b)(6)] | No | During FY 2023, CDC contributed to HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff effective January 1, 2024. |
| **C.3.b.3** | Ensure a workplace that is free from all forms of discrimination, including harassment and retaliation? [see MD-715, II(C)] | No | During FY 2023, CDC contributed to HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff effective January 1, 2024. |
| **C.3.b.4** | Ensure that subordinate supervisors have effective managerial, communication, and interpersonal skills to supervise in a workplace with diverse employees? [see MD-715 Instructions, Sec. I] | No | During FY 2023, CDC contributed to HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff effective January 1, 2024. |
| **C.3.b.5** | Provide religious accommodations when such accommodations do not cause an undue hardship? [see 29 CFR §1614.102(a)(7)] | No | During FY 2023, CDC contributed to HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff effective January 1, 2024. |
| **C.3.b.6** | Provide disability accommodations when such accommodations do not cause an undue hardship? [ see 29 CFR §1614.102(a)(8)] | No | During FY 2023, CDC contributed to HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff effective January 1, 2024. |
| **C.3.b.7** | Support the EEO program in identifying and removing barriers to equal opportunity. [see MD-715, II(C)] | No | During FY 2023, CDC contributed to HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff effective January 1, 2024. |
| **C.3.b.8** | Support the anti-harassment program in investigating and correcting harassing conduct. [see Enforcement Guidance, V.C.2] | N/A | During FY 2023, CDC contributed to HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff effective January 1, 2024. |
| **C.3.b.9** | Comply with settlement agreements and orders issued by the agency, EEOC, and EEO-related cases from the Merit Systems Protection Board, labor arbitrators, and the Federal Labor Relations Authority? [see MD-715, II(C)] | No | CDC ensures compliance with settlement agreements and orders issues by the agency.Effective January 1, 2024, an EEOcompliance performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff. |
| **C.3.c** | Does the EEO Director recommend to the agency head improvements or corrections, including remedial or disciplinary actions, for managers and supervisors who have failed in their EEO responsibilities? [see 29 CFR §1614.102(c)(2)] | Yes | None |
| **C.3.d** | When the EEO Director recommends remedial or disciplinary actions, are the recommendations regularly implemented by the agency? [see 29 CFR §1614.102(c)(2)] | Yes | None |

Table C6 - Management and Program Accountability

| right arrow**Compliance Indicator** downarrow**Measures** | **C.4 – The agency ensures effective coordination between its EEO programs and Human Resources (HR) program.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **C.4.a** | Do the HR Director and the EEO Director meet regularly to assess whether personnel programs, policies, and procedures conform to EEOC laws, instructions, and management directives? [see 29 CFR §1614.102(a)(2)] | Yes | None |
| **C.4.b** | Has the agency established timetables/schedules to review at regular intervals its merit promotion program, employee recognition awards program, employee development/training programs, and management/personnel policies, procedures, and practices for systemic barriers that may be impeding full participation in the program by all EEO groups? [see MD-715 Instructions, Sec. I] | Yes | None |
| **C.4.c** | Does the EEO office have timely access to accurate and complete data (e.g., demographic data for workforce, applicants, training programs, etc.) required to prepare the MD-715 workforce data tables? [see 29 CFR §1614.601(a)] | Yes | None |
| **C.4.d** | Does the HR office timely provide the EEO office have timely access to other data (e.g., exit interview data, climate assessment surveys, and grievance data), upon request? [see MD-715, II(C)] | Yes | None |
| **C.4.e** | Pursuant toSection II(C) of MD-715,does the EEO office collaborate with the HR office to: |  |  |
| **C.4.e.1** | Implement the Affirmative Action Plan for Individuals with Disabilities? [see 29 CFR §1614.203(d); MD-715, II(C)] | Yes | None |
| **C.4.e.2** | Develop and/or conduct outreach and recruiting initiatives? [see MD-715, II(C)] | Yes | None |
| **C.4.e.3** | Develop and/or provide training for managers and employees? [see MD-715, II(C)] | Yes | None |
| **C.4.e.4** | Identify and remove barriers to equal opportunity in the workplace? [see MD-715, II(C)] | Yes | None |
| **C.4.e.5** | Assist in preparing the MD-715 report? [see MD-715, II(C)] | Yes | None |

Table C5 - Management and Program Accountability

| right arrow**Compliance Indicator** downarrow**Measures** | **C.5 – Following a finding of discrimination, the agency explores whether it should take a disciplinary action.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **C.5.a** | Does the agency have a disciplinary policy and/or table of penalties that covers discriminatory conduct? 29 CFR § 1614.102(a)(6); see also Douglas v. Veterans Administration, 5 MSPR 280 (1981) | Yes | None |
| **C.5.b** | When appropriate, does the agency discipline or sanction managers and employees for discriminatory conduct?[see 29 CFR §1614.102(a)(6)]If “yes”, please state the number of disciplined/sanctioned individuals during this reporting period in the comments. | Yes | There was one finding of discrimination in FY 2023 (May2023). Noindividuals weredisciplined/sanctioned duringthis reportingperiod. |
| **C.5.c** | If the agency has a finding of discrimination (or settles cases in which a finding was likely), does the agency inform managers and supervisors about the discriminatory conduct?[see MD-715, II(C)] | Yes | None |

Table C6 - Management and Program Accountability

| right arrow**Compliance Indicator** downarrow**Measures** | **C.6 – The EEO office advises managers/supervisors on EEO matters.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **C.6.a** | Does the EEO office provide management/supervisory officials with regular EEO updates on at least an annual basis, including EEO complaints, workforce demographics and data summaries, legal updates, barrier analysis plans, and special emphasis updates? [see MD-715 Instructions, Sec. I] If “yes”, please identify the frequency of the EEO updates in the comments column. | Yes | The EEO Director provides the Annual State of the Agency address, meets with senior leaders of CDC components periodically throughout the year, and provides quarterly written updates to each CDC Component. |
| **C.6.b** | Are EEO officials readily available to answer managers’ and supervisors’ questions or concerns? [see MD-715 Instructions, Sec. I] | Yes | None |

**Essential Element D: Proactive Prevention
This element requires that the agency head make early efforts to prevent discrimination and to identify and eliminate barriers to equal employment opportunity.**

Table D1 - Proactive Prevention

| right arrow**Compliance Indicator** downarrow**Measures** | **D.1 – The agency conducts a reasonable assessment to monitor progress towards achieving equal employment opportunity throughout the year.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **D.1.a** | Does the agency have a process for identifying triggers in the workplace? [see MD-715 Instructions, Sec. I] | Yes | None |
| **D.1.b** | Does the agency regularly use the following sources of information for trigger identification: workforce data; complaint/grievance data; exit surveys; employee climate surveys; focus groups; affinity groups; union; program evaluations; special emphasis programs; reasonable accommodation program; anti-harassment program; and/or external special interest groups? [see MD-715 Instructions, Sec. I] | Yes | The OEEO Director convened a workgroup to formalize procedures for trigger identification, which were completed in late FY 2020. CDC is implementing the procedures in FY 2021. |
| **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)] | Yes | None |

Table D2 - Proactive Prevention

| right arrow**Compliance Indicator** downarrow**Measures** | **D.2 – The agency identifies areas where barriers may exclude EEO groups (reasonable basis to act.)** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **D.2.a** | Does the agency have a process for analyzing the identified triggers to find possible barriers? [see MD-715, (II)(B)] | Yes | None |
| **D.2.b** | Does the agency regularly examine the impact of management/personnel policies, procedures, and practices by race, national origin, sex, and disability?[see 29 CFR §1614.102(a)(3)] | Yes | None |
| **D.2.c** | Does the agency consider whether any group of employees or applicants might be negatively impacted prior to making human resource decisions, such as re-organizations and realignments? [see 29 CFR §1614.102(a)(3)] | Yes | None |
| **D.2.d** | Does the agency regularly review the following sources of information to find barriers: complaint/grievance data, exit surveys, employee climate surveys, focus groups, affinity groups, union, program evaluations, anti-harassment program, special emphasis programs, reasonable accommodation program; anti-harassment program; and/or external special interest groups? [see MD-715 Instructions, Sec. I] If “yes”, please identify the data sources in the comments column. | Yes | Sample data sources include data, exit surveys,employee climatesurveys, focusgroups, employeeorganizationgroups, unions,anti-harassmentprogram, anti-harassmentprogram, HRprogrammonitoring/evaluation, andworkforce data. |

Table D3 - Proactive Prevention

| right arrow**Compliance Indicator** downarrow**Measures** | **D.3 – The agency establishes appropriate action plans to remove identified barriers.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **D.3.a.** | Does the agency effectively tailor action plans to address the identified barriers, in particular policies, procedures, or practices?[see 29 CFR §1614.102(a)(3)] | Yes | None |
| **D.3.b** | If the agency identified one or more barriers during the reporting period, did the agency implement a plan in Part I, including meeting the target dates for the planned activities? [see MD-715, II(D)] | N/A | CDC's current barrier analysis initiative related to Hispanics and Latinos andGS-13s and above is ongoing. Upon completion, any identified barriers and associated action plans will be provided in the FY 2024 MD-715Report. |
| **D.3.c** | Does the agency periodically review the effectiveness of the plans? [see MD-715, II(D)] | Yes | None |

Table D4 - Proactive Prevention

| right arrow**Compliance Indicator** downarrow**Measures** | **D.4 – The agency has an affirmative action plan for people with disabilities, including those with targeted disabilities** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **D.4.a** | Does the agency post its affirmative action plan on its public website? [see 29 CFR 1614.203(d)(4)] Please provide the internet address in the comments. | Yes | <https://www.cdc.gov/oeeowe/eoguidance/programs.htm>  |
| **D.4.b** | Does the agency take specific steps to ensure qualified people with disabilities are aware of and encouraged to apply for job vacancies? [see 29 CFR 1614.203(d)(1)(i)] | Yes | None |
| **D.4.c** | Does the agency ensure that disability-related questions from members of the public are answered promptly and correctly? [see 29 CFR 1614.203(d)(1)(ii)(A)] | Yes | None |
| **D.4.d** | Has the agency taken specific steps that are reasonably designed to increase the number of persons with disabilities or targeted disabilities employed at the agency until it meets the goals? [see 29 CFR 1614.203(d)(7)(ii)] | Yes | None |

**Essential Element E: Efficiency
This element requires the agency head to ensure that there are effective systems for evaluating the impact and effectiveness of the agency’s EEO programs and an efficient and fair dispute resolution process.**

Table E1 - Efficiency

| right arrow**Compliance Indicator** downarrow**Measures** | **E.1 - The agency maintains an efficient, fair, and impartial complaint resolution process.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **E.1.a** | Does the agency timely provide EEO counseling, pursuant to 29 CFR §1614.105? | Yes | None |
| **E.1.b** | Does the agency provide written notification of rights and responsibilities in the EEO process during the initial counseling session**,** pursuant to29 CFR §1614.105(b)(1)? | Yes | None |
| **E.1.c** | Does the agency issue acknowledgment letters immediately upon receipt of a formal complaint, pursuant toMD-110, Ch. 5(I)? | Yes | None |
| **E.1.d** | Does the agency issue acceptance letters/dismissal decisions within a reasonable time (e.g., 60 days) after receipt of the written EEO Counselor report, pursuant to MD-110, Ch. 5(I)? If so, please provide the average processing time in the comments. | Yes | The agency averages 15 days to issue acceptance and dismissal decisions. |
| **E.1.e** | Does the agency ensure all employees fully cooperate with EEO counselors and EEO personnel in the EEO process, including granting routine access to personnel records related to an investigation, pursuant to29 CFR §1614.102(b)(6)? | Yes | None |
| **E.1.f** | Does the agency timely complete investigations, pursuant to 29 CFR §1614.108? | Yes | None |
| **E.1.g** | If the agency does not timely complete investigations, does the agency notify complainants of the date by which the investigation will be completed and of their right to request a hearing or file a lawsuit, pursuant to 29 CFR §1614.108(g)? | Yes | None |
| **E.1.h** | When the complainant does not request a hearing, does the agency timely issue the final agency decision, pursuant to29 CFR §1614.110(b)? | Yes | HHSimplemented a backlog reduction plan to eliminate cases identified as exceeding the statutory timeframes. The first part required HHS to address all new cases ripe for adjudication within their statutory timeframes of 60 or 45 days of election/notice to HHS. The second part required the resolution of the FADs in the backlog by priority levels. |
| **E.1.i** | Does the agency timely issue final actions following receipt of the hearing file and the administrative judge’s decision, pursuant to 29 CFR §1614.110(a)? | Yes | HHSimplemented a backlog reduction plan to eliminate cases identified as exceeding the statutory timeframes. The first part required HHS to address all new cases ripe for adjudication within their statutory timeframes of 60 or 45 days of election/notice to HHS. The second part required the resolution of the FADs in the backlog by priority levels. |
| **E.1.j** | If the agency uses contractors to implement any stage of the EEO complaint process, does the agency hold them accountable for poor work product and/or delays? [See MD-110, Ch. 5(V)(A)] If “yes”, please describe how in the comments column. | Yes | CDC performs sufficiency reviews of contractor work products (reports of investigation) and/or delays.The agency provides this information to HHS and the contractor's corporate office(s) for further action. |
| **E.1.k** | If the agency uses employees to implement any stage of the EEO complaint process, does the agency hold them accountable for poor work product and/or delays during performance review? [See MD-110, Ch. 5(V)(A)] | Yes | None |
| **E.1.l** | Does the agency submit complaint files and other documents in the proper format to EEOC through the Federal Sector EEO Portal (FedSEP)? [See 29 CFR § 1614.403(g)] | Yes | None |

Table E2 - Efficiency

| right arrow**Compliance Indicator** downarrow**Measures** | **E.2 – The agency has a neutral EEO process.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **E.2.a** | Has the agency established a clear separation between its EEO complaint program and its defensive function?[see MD-110, Ch. 1(IV)(D)] If “yes,’ please explain. | Yes | There is a firewall between the EEO function and the agency's defensive function. The firewall ensures that actions taken by the agency to protect itself from legal liability will not negatively influence or affect the agency's process for determining whether discrimination has occurred and if such determination did occur, remedying it at the earliest stage possible. |
| **E.2.b** | When seeking legal sufficiency reviews, does the EEO office have access to sufficient legal resources separate from the agency representative? [see MD-110, Ch. 1(IV)(D)] If “yes,” please identify the location of the attorney who conducts the legal sufficiency review in the comments column. | Yes | The attorney who conducts legal sufficiency reviews is within OEEOWE. |
| **E.2.c** | If the EEO office relies on the agency’s defensive function to conduct the legal sufficiency review, is there a firewall between the reviewing attorney and the agency representative?[see MD-110, Ch. 1(IV)(D)] | Yes | The EEO office does not rely on the agency’s defensive function for sufficiency reviews. |
| **E.2.d** | Does the agency ensure that its agency representative does not intrude upon EEO counseling, investigations, and final agency decisions?[see MD-110, Ch. 1(IV)(D)] | Yes | None |
| **E.2.e** | If applicable, are processing time frames incorporated for the legal counsel’s sufficiency review for timely processing of complaints? EEOC Report, *Attaining a Model Agency Program: Efficiency* (Dec. 1, 2004) | Yes | None |

Table E3 - Efficiency

| right arrow**Compliance Indicator** downarrow**Measures** | **E.3 - The agency has established and encouraged the widespread use of a fair alternative dispute resolution (ADR) program.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **E.3.a** | Has the agency established an ADR program for use during both the pre-complaint and formal complaint stages of the EEO process?[see 29 CFR §1614.102(b)(2)] | Yes | None |
| **E.3.b** | Does the agency require managers and supervisors to participate in ADR once it has been offered? [see MD-715, II(A)(1)] | Yes | None |
| **E.3.c** | Does the agency encourage all employees to use ADR, where ADR is appropriate?[see MD-110, Ch. 3(IV)(C)] | Yes | None |
| **E.3.d** | Does the agency ensure a management official with settlement authority is accessible during the dispute resolution process? [see MD-110, Ch. 3(III)(A)(9)] | Yes | None |
| **E.3.e** | Does the agency prohibit the responsible management official named in the dispute from having settlement authority? [see MD-110, Ch. 3(I)] | Yes | None |
| **E.3.f** | Does the agency annually evaluate the effectiveness of its ADR program? [see MD-110, Ch. 3(II)(D)] | Yes | None |

Table E4 - Efficiency

| right arrow**Compliance Indicator** downarrow**Measures** | **E.4 – The agency has effective and accurate data collection systems in place to evaluate its EEO program.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **E.4.a** | Does the agency have systems in place to accurately collect, monitor, and analyze the following data: |  |  |
| **E.4.a.1** | Complaint activity, including the issues and bases of the complaints, the aggrieved individuals/complainants, and the involved management official? [see MD-715, II(E)] | Yes | None |
| **E.4.a.2** | The race, national origin, sex, and disability status of agency employees?[see 29 CFR §1614.601(a)] | Yes | None |
| **E.4.a.3** | Recruitment activities? [see MD-715, II(E)] | Yes | None |
| **E.4.a.4** | External and internal applicant flow data concerning the applicants’ race, national origin, sex, and disability status? [see MD-715, II(E)] | Yes | None |
| **E.4.a.5** | The processing of requests for reasonable accommodation? [29 CFR § 1614.203(d)(4)] | Yes | None |
| **E.4.a.6** | The processing of complaints for the anti-harassment program? [see EEOC Enforcement Guidance on Vicarious Employer Liability for Unlawful Harassment by Supervisors (1999), § V.C.2] | Yes |  |
| **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] | Yes | From August 8until October 14,2022, CDCemployees, in partnership with HHS, were invited to complete the Workforce Demographic Survey. |

Table E5 - Efficiency

| right arrow**Compliance Indicator** downarrow**Measures** | **E.5 – The agency identifies and disseminates significant trends and best practices in its EEO program.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **E.5.a** | Does the agency monitor trends in its EEO program to determine whether the agency is meeting its obligations under the statutes EEOC enforces? [see MD-715, II(E)] If “yes”, provide an example in the comments. | Yes | The agency monitors trends in workforce data, requested andprovidedaccommodations,participation inEEO training, andparticipation inSpecial EmphasisPrograms. |
| **E.5.b** | Does the agency review other agencies’ best practices and adopt them, where appropriate, to improve the effectiveness of its EEO program?[see MD-715, II(E)] If “yes”, provide an example in the comments. | Yes | The EEO Director, Deputy, and managersmeet regularlywith representativesfrom other HHS Operating Divisions, share CDC best practices, and consider bestpractices from other agencies for adoption at CDC. |
| **E.5.c** | Does the agency compare its performance in the EEO process to other federal agencies of similar size? [see MD-715, II(E)]  | Yes | None |

**Essential Element F: Responsiveness and Legal Compliance
This element requires federal agencies to comply with EEO statutes and EEOC regulations, policy guidance, and other written instructions.**

Table F1 -Responsiveness and Legal Compliance

| right arrow**Compliance Indicator** downarrow**Measures** | **F.1 – The agency has processes in place to ensure timely and full compliance with EEOC Orders and settlement agreements.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **F.1.a** | Does the agency have a system of management controls to ensure that its officials timely comply with EEOC orders/directives and final agency actions?[see 29 CFR §1614.102(e); MD-715, II(F)] | Yes | None |
| **F.1.b** | Does the agency have a system of management controls to ensure the timely, accurate, and complete compliance with resolutions/settlement agreements? [see MD-715, II(F)] | Yes | None |
| **F.1.c** | Are there procedures in place to ensure the timely and predictable processing of ordered monetary relief? [see MD-715, II(F)] | Yes | None |
| **F.1.d** | Are procedures in place to process other forms of ordered relief promptly? [see MD-715, II(F)] | Yes | None |
| **F.1.e** | When EEOC issues an order requiring compliance by the agency, does the agency hold its compliance officer(s) accountable for poor work product and/or delays during performance review? [see MD-110, Ch. 9(IX)(H)] | Yes | None |

Table F2 – Responsiveness and Legal Compliance

| right arrow**Compliance Indicator** downarrow**Measures** | **F.2 – The agency complies with the law, including EEOC regulations, management directives, orders, and other written instructions.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **F.2.a** | Does the agency timely respond and fully comply with EEOC orders?[see 29 CFR §1614.502; MD-715, II(E)] | Yes | None |
| **F.2.a.1** | When a complainant requests a hearing, does the agency timely forward the investigative file to the appropriate EEOC hearing office? [see 29 CFR §1614.108(g)] | Yes | None |
| **F.2.a.2** | When there is a finding of discrimination that is not the subject of an appeal by the agency, does the agency ensure timely compliance with the orders of relief? [see 29 CFR §1614.501] | Yes | None |
| **F.2.a.3** | When a complainant files an appeal, does the agency timely forward the investigative file to EEOC’s Office of Federal Operations?[see 29 CFR §1614.403(e)] | Yes | None |
| **F.2.a.4** | Pursuant to 29 CFR §1614.502, does the agency promptly provide EEOC with the required documentation for completing compliance? | Yes | None |

Table F3 – Responsiveness and Legal Compliance

| right arrow **Compliance Indicator**downarrow **Measures** | **F.3 - The agency reports to EEOC its program efforts and accomplishments.** | **Measure Met?****(Yes/No/NA)** | **Comments****FY 2023** |
| --- | --- | --- | --- |
| **F.3.a** | Does the agency timely submit to EEOC an accurate and complete No FEAR Act report? [Public Law 107-174 (May 15, 2002), §203(a)] | Yes | None |
| **F.3.b** | Does the agency timely post on its public webpage its quarterly No FEAR Act data?[see 29 CFR §1614.703(d)] | Yes | None |

**MD-715 – Part H1**

**Agency EEO Plan to Attain the Essential Elements of a Model EEO Program**

Please describe the status of each plan that the agency has implemented to correct deficiencies in the EEO program.

Statement of Model Program Essential Element Deficiency

| **Compliance Indicator** | **Brief Description of Program Deficiency** |
| --- | --- |
| B.1.a.  | Is the agency head the immediate supervisor of the person (“EEO Director”) who has day-to-day control over the EEO office? [see 29 CFR §1614.102(b)(4)]  |

Objectives(s) and Dates for EEO Plan

| **Data Initiated (mm/dd/yyyy)** | **Objective** | **Target Date (mm/dd/yyyy)** | **Modified Data (mm/dd/yyyy)** | **Date Completed (mm/dd/yyyy)** |
| --- | --- | --- | --- | --- |
| 07/01/2023 | Achieving compliance with the Elijah E. Cummings Act of Federal Employee Anti- Discrimination Act by ensuring the head of EEO reports directly to the head of CDC. | 09/30/2024 |  |  |

Responsible Official(s)

| **Title** | **Name** | **Performance Standards Address the Plan?****(Yes or No)** |
| --- | --- | --- |
| Chief Human Capital Officer and Deputy Ethics Counselor | Sylana Tramble | Yes |
| Director, Office of Equal Employment Opportunity | Reginald R. Mebane | Yes |

Planned Activities Toward Completion of Objective

| **Target Data (mm/dd/yyyy)** | **Planned Activities** | **Sufficient Funding & Staffing?****(Yes or No)** | **Modified Date (mm/dd/yyyy)** | **Completion Date (mm/dd/yyyy)** |
| --- | --- | --- | --- | --- |
| 9/30/2024 | HHS' Equal Employment Opportunity and Diversity & Inclusion Office (EEODI) is currently engaged in the process of achieving compliance with the Elijah E. Cummings Act of Federal Employee Anti-Discrimination Act through the development of a plan to ensure the head of EEO reports directly to the head of the HHS agency. It is anticipated that this plan will be developed by the end of the third quarter FY 2024 and vetted through the Office of the Assistant Secretary for Administration, OGC, HR, etc. | Yes |  |  |

**MD-715 – Part H2**

 **Agency EEO Plan to Attain the Essential Elements of a Model EEO Program**

Please describe the status of each plan that the agency has implemented to correct deficiencies in the EEO program.

*Statement of Model EEO Program Essential Element Deficiency*

| **Compliance Indicator** | **Brief Description of Program Deficiency** |
| --- | --- |
| C.3.b.1. Resolve EEO problems/disagreements/conflicts, including the participation in ADR proceedings? [see MD-110, Ch. 3.I]  | Rating officials should evaluate the performance of managers and supervisors based on resolving EEO problems/ disagreements/conflicts, including the participation in ADR proceedings. |

Objectives(s) and Dates for EEO Plan

| **Date Initiated** **(mm/dd/yyyy)** | **Objective** | **Target Date (mm/dd/yyyy)** | **Modified Date (mm/dd/yyyy)** | **Date Completed (mm/dd/yyyy)** |
| --- | --- | --- | --- | --- |
| 10/1/2022 | During FY 2023, CDC contributed to HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff. | 01/01/2025 |  | 01/01/2024 |

Responsible Official(s)

| **Title** | **Name** | **Performance Standards Address the Plan?****(Yes or No)** |
| --- | --- | --- |
| Director, OEEO | Reginald R. Mebane | Yes |
| Chief Human Capital Officer and Deputy Ethics Counselor | Sylana Tramble | Yes |

**MD-715 – Part H3 – H11**

 **Agency EEO Plan to Attain the Essential Elements of a Model EEO Program**

Please describe the status of each plan that the agency has implemented to correct deficiencies in the EEO program.

**Statement of Model Program Essential Element Deficiency**

|  |  |
| --- | --- |
| **Type of Program Deficiency** | **Brief Description of Program Deficiency** |
| H3 - C.3.b.2. Ensure full cooperation of employees under his/her supervision with EEO officials, such as counselors and investigators? [see 29 CFR §1614.102(b)(6)] | Rating officials should evaluate the performance of managers and supervisors based on ensuring full cooperation of employees under his/her supervision with EEO officials (counselors and investigators). See C.3.b.1. |
| H4 - C.3.b.3. Ensure a workplace that is free from all forms of discrimination, including harassment and retaliation? [see MD-715, II(C)]  | Rating officials should evaluate the performance of managers and supervisors based on ensuring a workplace that is free from all forms of discrimination, including harassment and retaliation. See C.3.b.1. |
| H5 - C.3.b.4. Ensure that subordinate supervisors have effective managerial, communication, and interpersonal skills to supervise in a workplace with diverse employees? [see MD-715 Instructions, Sec. I] | Rating officials should evaluate the performance of managers and supervisors based on ensuring subordinate supervisors have effective managerial, communication, and interpersonal skills to supervise in a workplace with diverse employees. See C.3.b.1. |
| H6 - C.3.b.9. Comply with settlement agreements and orders issued by the agency, EEOC, and EEO-related cases from the Merit Systems Protection Board, labor arbitrators, and the Federal Labor Relations Authority? [see MD-715, II(C)] | Rating officials should evaluate the performance of managers and supervisors based on complying with settlement agreements and orders issued by the agency, EEOC, and EEO-related cases from the MSPB, labor arbitrators, and the FLRA. See C.3.b.1. |
| H7 - C.3.b.8. Support the anti-harassment program in investigating and correcting harassing conduct?. [see Enforcement Guidance, V.C.2] | Rating officials should evaluate the performance of managers and supervisors based on supporting the anti-harassment program in investigating and correcting harassing conduct. |
| H8 - C.3.b.5. Provide religious accommodations when such accommodations do not cause an undue hardship? [see 29 CFR §1614.102(a) (7)] | Rating officials should evaluate the performance of managers and supervisors based on providing religious accommodations when such accommodations do not cause an undue hardship. See C.3.b.1. |
| H9 - C.3.b.6. Provide disability accommodations when such accommodations do not cause an undue hardship? [ see 29 CFR §1614.102(a) (8)] | Rating officials should evaluate the performance of managers and supervisors based on providing disability accommodations when such accommodations do not cause an undue hardship. See C.3.b.1.  |
| H10 - C.3.b.7. Support the EEO program in identifying and removing barriers to equal opportunity?. [see MD-715, II(C)] | Rating officials should evaluate the performance of managers and supervisors based on supporting the EEO program in identifying and removing barriers to equal opportunity. See C.3.b.1. |
| H11 - C.3.a. Pursuant to 29 CFR §1614.102(a)(5), do all managers and supervisors have an element in their performance appraisal that evaluates their commitment to agency EEO policies and principles and their participation in the EEO program? |  |
|  |  |

**Objective(s) and Dates for EEO Plan**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date Initiated (mm/dd/yyyy)** | **Objective** | **Target Date (mm/dd/yyyy)** | **Modified Date (mm/dd/yyyy)** | **Date Completed (mm/dd/yyyy)** |
| 10/01/2022 | During FY 2023, CDC contributed to HHS’s Supervisory and Non-Supervisory Performance Management Appraisal Program (PMAP) Policy update to ensure EEO compliance for the agency’s leadership team. This performance element is now mandatory for all CDC supervisors and highly encouraged for non-supervisory staff. | 01/01/2025 |  | 01/01/2024 |

**Responsible Official(s)**

|  |  |  |
| --- | --- | --- |
| **Title** | **Name** | **Performance Standards Address the Plan?****(Yes or No)** |
| EEOWE Director | Reginald Mebane, MS | Yes |
| Chief Human Capital Officer and Deputy Ethics Counselor | Sylana Tramble | Yes |

MD-715 – **Part I-1**

AgencyEEO Plan to Eliminate Identified Barrier

Please describe the status of each plan that the agency implemented to identify possible barriers in policies, procedures, or practices for employees and applicants by race, ethnicity, and gender.

Statement of Condition That Was a Trigger for a Potential Barrier:

|  |  |  |
| --- | --- | --- |
| **Source of the Trigger** | **Specific Workforce Data Table**  | **Narrative Description of Trigger** |
| Workforce Data (if so identify the table) | Workforce Data Table - A1 | The Agency continues to experience less than expected participation rates for both Hispanic males (1.29% vs. 5.17%) [1.28% in 2017] and Hispanic females (1.86% vs. 4.79%) [1.83% in 2017] when compared to their 2010 CLF benchmarks. |

EEO Group(s) Affected by Trigger

|  |
| --- |
| **Barrier Group** |
| Hispanic or Latino Males |
| Hispanic or Latino Females |

Barrier Analysis Process Completed? Yes

Barrier Analysis Process

|  |  |  |
| --- | --- | --- |
| **Barrier Name** | **Barriers Identified****(Yes or No)** | **Description of Policy, Procedure, or Practice** |
| Institutional Barriers to hiring Hispanics | Yes | The results of the analysis indicate that there are institutional barriers within policies, procedures, and practices related to recruiting, hiring, developing, and promoting Hispanics.Hispanics.restricts targeted recruitment for Hispanics outside of the local commuting area.visibility and/or understanding of the potential use of career ladder positions to attract and retain candidates in mission critical occupational series.  |
| Attitudinal Barriers to Hiring Hispanics | Yes | The analysis indicates that there are attitudinal barriers that inhibit equitable progress for Hispanics.Executive Order 13171 instructing federal agencies to improve the representation of Hispanics in federal employment process, including selection for promotions, temporary details, and global assignment. |

Objective(s) and Dates for EEO Plan

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Data Initiated** | **Target Date** | **Sufficient Funding / Staffing** | **Date Modified** | **Date Completed** | **Objective Description** |
| 08/28/2019 | 09/30/202 | Yes |  | 10/06/2020 | Finalize Action Plan based on barrier analysis results and HWG recommendations |
| 04/01/2017 | 07/30/2018 | Yes |  | 08/02/2018 | Convene Hispanic Working Group to conduct barrier analysis. |
| 04/01/2017 | 07/30/2018 | No |  | 09/30/2018 | Appoint a Collateral Hispanic Employment Program Manager until funding is approved for a permanent position. |
| 04/01/2017 | 09/30/2017 | Yes | 09/30/2018 |  | Finalize Hispanic/Latino Barrier Analysis Report |
| 08/29/2019 | 10/30/2019 | Yes |  |  | Inform CDC workforce of the outcome of the barrier analysis and recommendations. |
| 03/01/2021 | 09/30/2024 | Yes | 09/30/2018 |  | Assess results and revise action plan, as necessary |

Responsible Official(s)

|  |  |  |
| --- | --- | --- |
| **Title** | **Name** | **Performance Standards Address the Plan?** **(Yes or No)** |
| EEO Director | Reginald Mebane | Yes |
| Chief Human Capital Officer and Deputy Ethics Counselor | Sylana A. Tramble | Yes |

Planned Activities Toward Completion of Objective

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Target Date (mm/dd/yyyy)** | **Planned Activities** | **Sufficient Staffing & Funding?** | **Modified Date (mm/dd/yyyy)** | **Completion Date (mm/dd/yyyy)** |
| 6/30/20220 | Disseminate action plan, timelines, and key performance indicators with agency stakeholders. | Yes | 08/31/2022 |  |
| 09/30/2020 | Initiate implementation of the Action Plan agency-wide. | Yes | 10/01/2022 |  |
| 08/30/2021 | Hire new Affirmative Employment Manager (AEM) after the departure of the prior AEM in FY 2020 (new activity) | Yes |  | 09/15/2021 |

Report of Accomplishments

|  |  |
| --- | --- |
| **Fiscal Year** | **Accomplishments** |
| 2022 | The OEEOWE Affirmative Employment Program Team (AEPT) was launched in December 2021 and consists of one AEP Manager, four AEP Specialists, one Diversity Specialist, and one Program Specialist. AEPT is charged with partnering with CIOs directly to track and analyze workforce data and conduct assessments to identify disparities, inequities, or barriers that may impede equal employment opportunities, and develop strategies to eliminate the identified disparities, inequities, or barriers. Each AEP Specialist also provides support and guidance to CDC Diversity and Inclusion Councils.Additionally, the AEPT developed an assessment process that will allow for more insight into the policies, programs, and practices of CIOs to leverage best practices and assist in making improvements where needed. |
| 2022 | In FY 2022, CDC coordinated and participated in a total of 51 recruitment and outreach events, many of which specifically targeted Hispanic orMinority Serving Institutions (MSI)resulting in over 2,000 contacts.CDC held a virtual career expo for Hispanic serving institutions (HSIs), undergraduate and graduate students, and Hispanic and Latino professionals to learn about the CDC employment process, receive resume guidance, and engage with CDC leaders concerning careeropportunities within the organization. Over 1,000 registrants learned about career opportunities at CDC. |
| 2022 | CDC established a process for Trigger Identification and a SOP for conducting Barrier Analysis. The agency also convened a cross-agency Barrier Analysis Sprint Team to develop a systematic, systemic, and measurable action plan to correct barriers to equal employment opportunity for Hispanics and Latinos that were identified in a 2018 barrier investigation.Additionally, CDC established a Barrier Analysis contract and began collecting both quantitative and qualitative data in support and preparation of enterprise-wide barrier analysis in which the action plan implementation will begin in FY 2023. |
| 2023 | From August 8 until October 14, 2022, CDC employees, in partnership with HHS, were invited to complete the Workforce Demographic Survey. During this time, FTEs and U.S. Public Health Service (PHS) Commissioned Corp Officers were encouraged to self-identify their ethnicity, race, sex, disability status, sexual orientation, gender identity, and veteran status. CDC’s workforce participation rate updates include the number of Hispanics/Latinos increased by 61% (to 5.2% of permanent and temporary civil service employees). |
| 2023 | +UNIDOS, a Hispanic/Latino Employee Association, became CDC's first approved employee resource group under the recently revised Official Work Group Policy. |
| 2023 | In FY 2023, +UNIDOS received CDC's inaugural DEIAB and EEO Workplace Equity Innovation Award. |
| 2023 | Throughout FY 2023, CDC implemented its enhanced enterprise-wide barrier analysis (BA) data collection process. Additionally, the BA Workgroup completed its trigger identification phase that focused on the inclusion in higher grades (GS-13 and above) for the following reasons:* Prior barrier analysis results related to:
* Black and Asian Women Hispanics and Latinos

Workforce data trends to include applicant flow dataTrigger identification findings  |

**MD-715 – Part J**

**Special Program Plan for the Recruitment, Hiring, Advancement, and Retention of Persons with Disabilities**

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

**Section I: Efforts to Reach Regulatory Goals**

EEOC regulations (29 C.F.R. § 1614.203(d)(7)) require agencies to establish specific numerical goals for

increasing the participation of persons with reportable and targeted disabilities in the federal government.

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.

* 1. Cluster GS-1 to GS-10 (PWD) Answer: No
	2. Cluster GS-11 to SES (PWD) Answer: No

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.

1. Cluster GS-1 to GS-10 (PWTD) Answer: No
2. Cluster GS-11 to SES (PWTD) Answer: No

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

The agency communicated numerical goals to CDC leaders, hiring managers, and recruiters through written communication and meetings with the EEO Advisory Groups and DEIAB Councils, AEP Specialist consultations, human resources (HR) pre-employment meetings with selecting officials, Schedule A- related trainings, the annual State of the Agency briefing, the OEEOWE Annual Report, the newly developed Human Capital Health Dashboards which contains workforce demographics including disability goals, and other services and support for PWDs.

**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.

**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.

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

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

Answer: Yes

Responsible Staff Identify

| Disability Program Task | #of FTE Staff by Employment Status (Full Time) | #of FTE Staff by Employment Status (Full Time) | #of FTE Staff by employment Status (Full Time) | Responsible Official (Name, Title, Office, Email) |
| --- | --- | --- | --- | --- |
| Special Emphasis Program for PWD and PWTD | 1 | 0 | 0 | Vacant, Disability Program Manager, CDC/OEEOWE |
| Section 508 Compliance | 1 | 0 | 0 | Mark Urban, CDC Section 508 Coordinator, CDC/OCOO, FKA2@cdc.gov  |
| Processing applications from PWD and PWTD | 1 | 0 | 0 | Sandra Williams, Supervisory HR. Specialist, CDC/OHR Special Emphasis Program, Client Services Office, AVY6@cdc.gov  |
| Processing reasonable accommodation requests from applicants and employees | 5 | 0 | 0 | Anthony Stockton, Reasonable Accommodations Program Manager, CDC/OEEO, CNX9@cdc.gov Michelle Williams, jyo8@cdc.gov; Curtis Huber, EEO Specialist, ups5@cdc.gov Lucille Stevenson, LOF1@cdc.gov  |
| Answering questions from the public about hiring authorities that take disability into account | 4 | 0 | 0 | Sandra Williams, Supervisory HR. Specialist, CDC/OHR Special Emphasis Program, Client Services Office, AVY6@cdc.gov Kelly Mathis, Supervisory HR Specialist, HR Strategic Business Support Activity Office, CDC/OHR GWP6@cdc.gov Vacant, Disability Program Manager, AEP Team, CDC/OEEOWE |
| Architectural Barriers Act Compliance | 1 | 0 | 0 | Vacant, Disability Program Manager, CDC/OEEOWE  |

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

In FY 2023, CDC provided training sessions on the Americans with Disabilities Act as Amended (ADAAA) and Rehabilitation Act of 1973 as Amended to over 191 managers, supervisors, and employees, including the Disability Program Managers and RA staff. The training included a focus on statutory and legal authorities, recent legal developments, and how to provide RAs to the agency’s workforce. Six of these interactive sessions were facilitated by the National Employment Law Institute (NELI), four OEEOWE’s Ask the RA Manager trainings and five Basic Employee Relations training sessions. In addition, the Disability Program Manager and RA Staff attended the 2023 National Americans with Disabilities Act (ADA) Symposium, Federal Dispute Resolution (FDR), EEOC’s Examining Conflicts in Employment Law (EXCEL), ADR, and ADAAA training conferences.

**Plan to Ensure Sufficient Funding for the Disability Program**

Has the agency provided sufficient funding and other resources to successfully implement the disability

program during the reporting period? If “no”, describe the agency’s plan to ensure all aspects of the

disability program have sufficient funding and other resources.

Answer: Yes

**Section III: Plan to Recruit and Hire Individuals with Disabilities**

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

A. PLAN TO IDENTIFY JOB APPLICATIONS WITH DISABILITIES

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

In FY 2023, CDC coordinated and participated in a total of 83 recruitment and outreach events, many of which were conducted virtually that resulted in over 7,000 contacts. Of these 83 recruitment events, two targeted PWDs, including veterans with disabilities yielding 190 contacts. As CDC strives to be the model employer for individuals with disabilities, the PWDs Internship Program works with partnering organizations such as disABILITY LINK and others to provide valuable work experience in scientific, technical, and administrative career fields, to individuals with various levels of education and skills. The program was established in support of the Presidential Initiative to increase federal employment of PWDs under Executive Order 13548. It was designed to reduce barriers and grow opportunities for PWDs interested in seeking employment with the federal government. Additionally, the agency regularly promotes non- competitive hiring as a practice during monthly Strategic Business Partners (SBP) meetings with hiring managers and management officials to discuss hiring plans and other HR-specific needs. The agency’s subject matter experts (SMEs) encourage selecting officials to maximize their use of the USAJobs Agency Talent Portal (ATP) to identify and review resumes of Schedule A and other candidates who could be hired non-competitively. All hiring officials can access information about Schedule A candidates within the ATP. Individuals applying to vacancies through Schedule A are also placed on a non- competitive referral list that is shared with hiring managers for consideration.

CDC continues to distribute and promote vacancy announcements, career- advancing training opportunities, and detail positions internally while encouraging employees, including those with disabilities, to participate in various mentorship programs. CDC has extensive relationships with the Department of Defense’s Hiring Our Heroes Skill Bridge Program, and the Department of Veterans Affairs (VA) Non-Paid Work Experience (NPWE) Program. Through these relationships, CDC strengthened its targeted employment initiative efforts. Each program assists in filling mission-critical positions, boosting employee engagement, and increasing morale and DEIAB efforts across CDC. In FY 2023, CDC placed eight disabled veterans in fellowship positions. One of these selectees subsequently secured a permanent position within CDC.

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.

CDC continues to encourage the utilization of 5 CFR 213.3102(u) to hire persons under the Schedule A authority. Moreover, the agency uses the Veterans Recruitment Act (VRA) and 30% or More Disabled Veterans Noncompetitive Appointment as a recruitment tool to hire students and other applicants under the Workforce Recruitment Plan (WRP), PWDs Internship Program, and the federal Non-Paid Work Experience Program for disabled veterans. Hiring flexibilities are discussed and encouraged during the pre- consultation phase of all hiring actions and during monthly Strategic Business Partner meetings with CIOs.

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.

CDC currently utilizes the ATP to identify and review resumes of Schedule A and other potential non-competitive eligible individuals. In addition, CDC accepts resumes from Schedule A applicants on numerous external and status announcements. To determine eligibility for appointment, HR Specialists conduct thorough reviews of applicant resumes and supporting documentation, which include but are not limited to a Schedule A letter, transcripts, and Department of Veterans Affairs documents. Hiring managers have direct access to the ATP and are encouraged to use the tool; however, HR specialists provide a list of eligible candidates during the pre-consultation phase of hiring actions with an explanation of how and when the individual may be appointed. For external and status announcements, qualified individuals are referred to the hiring officials on the certificates of eligibles. Upon determining an applicant’s eligibility for the position and subsequent interview, the hiring official makes a selection. As part of the final review of hiring selections, HR Specialists conduct a Schedule A authenticity check to verify the submitted Schedule A letter by contacting the health care provider. Once verified, OHR extends a tentative offer letter to the selectee.

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

Yes. Schedule A and other hiring flexibilities are discussed with agency hiring managers during monthly Strategic Business Partner (SBP) meetings, pre- consultations for all hiring actions, and consultative meetings led by AEP Specialists.

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.

CDC strengthened its partnership with multiple organizations that assist PWDs in securing and maintaining employment. In FY 2023, the agency participated in recruitment and outreach activities with DisABILITY Link, Disabled American Veterans, Department of Labor, and the U.S. Department of Veteran Affairs.

**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 No

b. New Hires for Permanent Workforce (PWTD) Answer No

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

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum"

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

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum"

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 Yes

b. Promotions for MCO (PWTD) Answer Yes

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum."

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

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

A. ADVANCEMENT PROGRAM PLAN

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

CDC is committed to supporting the career advancement of PWDs to include disabled veterans within the organization. Examples of such commitment in the past year include, but are not limited to: Distribution of vacancy announcements, training opportunities, and detail positions broadly throughout CDC. Training Hiring Officials about hiring, retaining, and converting qualified PWDs using the Special Hiring Authorities. Conducting data analyses to understand the representation of PWDs within the CDC workforce, to identify potential barriers to advancement, and to develop effective strategies to improve the advancement of PWDs within the workforce. Encouraging employees to participate in various mentorship programs, such as the Mentoring Circle for Employees and Veterans with Disabilities. Educating the workforce on available resources for disabled veterans via multiple communication channels within CDC and externally (e.g., Feds Hire Vets).

Promoting participation in and support for disability and veteran-specific Employee Organizations, Associations, and Workgroups among employees, including the CDC/ATSDR Military Veterans Professional (MVP) Employee Association and Disability Interest Group (DIG).

**B. CAREER DEVELOPMENT OPPORTUNITES**

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

CDC offers several programs, tools, resources, and opportunities to support and encourage professional growth and advancement for all employees to include: Instructor-led and self-guided trainings Career map development and individual development plans Formal and Informal Coaching and Mentorships Temporary details and other career development opportunities CDC’s CareerReady, Learn and Lead, and Long-Term Education Program, which allows federal employees to receive full-time training through non-government entities for up to two years.

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

Table E3 - Efficiency

| Career Development Opportunities | Total Participants Applicants (#) / Selectees (#) | PWD Applicants (#) / Selectees (#) | PWTD Applicants (#) / Selectees (#) |
| --- | --- | --- | --- |
| Other Career Development Programs | 0/0 | 0/0 | 0/0 |
| Detail Programs | UNKN / UNKN | UNKN / UNKN | UNKN / UNKN |
| Training Programs | UNKN / 321 | 79 / 79 | 7 / 7 |
| Coaching Programs | UNKN / UNKN | UNKN / UNKN | UNKN / UNKN |
| Internship Programs | UNKN / 10 | 0 / 0 | 0 / 0 |
| Fellowship Programs | UNKN / 168 | 10 / 10 | 2 / 2 |
| Mentoring Programs | 16 / 16 | 3 / 3 | 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: N/A

b. Selections (PWD) – Answer: N/A

Data is not available to complete a comprehensive assessment of participation by PWD.

4. Do triggers exist for PWTD among the applicants and/or selectees for any of the career development programs? (Th relevant applicant pool for the applicants and the applicant pool for selectees.) If “yes”, describe the trigger(s) in the text 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

Data are not available to complete a comprehensive assessment of participation by PWTD.

**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

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum."

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: Yes

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum."

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

No data available.

**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: Yes

 ii. Internal Selections (PWD) – Answer: Yes

 b. Grade GS-15

 i. Qualified Internal Applicants (PWD) – Answer: No

 ii. Internal Selections (PWD) – Answer: Yes

 c. Grade GS-14

 i. Qualified Internal Applicants (PWD) – Answer: No

 ii. Internal Selections (PWD) – Answer: Yes

 d. Grade GS-13

i. Qualified Internal Applicants (PWD) – Answer: No

 ii. Internal Selections (PWD) – Answer: Yes

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum."

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: Yes

b. New Hires to GS-15 (PWD) – Answer: Yes

c. New Hires to GS-14 (PWD) – Answer: No

d. New Hires to GS-13 (PWD) – Answer: No

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum."

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: Yes

b. New Hires to GS-15 (PWTD) – Answer: Yes

c. New Hires to GS-14 (PWTD) – Answer: No

d. New Hires to GS-13 (PWTD) – Answer: Yes

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum."

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: No

 ii. Internal Selections (PWD) – Answer: Yes

 b. Managers

 i. Qualified Internal Applicants (PWD) – Answer: No

 ii. Internal Selections (PWD) – Answer: Yes

 c. Supervisors

 i. Qualified Internal Applicants (PWD) – Answer: No

 ii. Internal Selections (PWD) – Answer: No

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum."

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 (PWD) – Answer: Yes

 ii. Internal Selections (PWD) – Answer: Yes

 b. Managers

 i. Qualified Internal Applicants (PWD) – Answer: No

 ii. Internal Selections (PWD) – Answer: Yes

 c. Supervisors

 i. Qualified Internal Applicants (PWD) – Answer: No

 ii. Internal Selections (PWD) – Answer: No

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum."

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: Yes

 b. New Hires for Managers (PWD) Answer: Yes

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

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum."

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: Yes

 b. New Hires for Managers (PWTD) Answer: Yes

 c. New Hires for Supervisors (PWTD) Answer: No

Please refer to supporting document entitled "CDC FY 2023 MD 715 Report Part J Addendum."

**Section V: Plan to Improve Retention of Persons with Disabilities**

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

**A. VOLUNTARY AND INVOLUNTARY SEPARATIONS**

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

Answer: No

Over 49% of eligible Schedule A employees that successfully completed the two-year trial were converted to a career-conditional appointment. Most of remaining eligible Schedule A employees remained in an excepted service position while the others resigned, accepted a position with another federal agency, or were ineligible for conversion.

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

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

N/A

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.

Triggers do not exist.

**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.

An individual that desires to file a complaint can go to [https://www.cdc.gov/ other/accessibility.html](https://www.cdc.gov/%20other/accessibility.html%20)

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 information on Architectural Barriers Act is found at https://www.cdc.gov/ oeeowe/eoguidance/policy.htm#barriers

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.

CDC is committed to complying with federal regulations to improve and advance accessibility of its facilities and technology. Agency leaders from OEEOWE; the Office of Safety, Security, and Asset Management; and the Office of the Chief Information Officer (OCIO) collaborate to proactively identify and improve accessibility of agency facilities and/or technology.

**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 RA program managed 439 requests for RAs in FY 2023, with 95% closed within 60 days of receiving qualifying information.

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 top three accommodations provided were related to: Modified Work Schedules General Equipment (e.g., chairs, sit/stand workstations) Other than Coach Class Travel Accomplishments: Completed the Accommodation Tracking System (ATS) enhancements which included reporting features, streamlined the “Supervisor’s” tab, added an “Equipment” tab that tracks expenditures, and included the RA case history for requests submitted.

Finalized RA policy to include escalation process for the denials of accommodations. Implemented a new form to place employees in the HR Exchange database for reassignment searches. Collaborated with 508 Compliance subject matter experts to streamline the process for providing software and assistive equipment. Collaborated with OCIO to maintain a stock of 24”, 32”, and 43” monitors to support RA requests. Responded to 827 inquiries to the RA Inquiry email box within 24 hours. Provided the following agency-wide trainings: Six NELI trainings on ADA and RA Quarterly “Ask the RA Manager” sessions ATS demo and RA training sessions to CIOs Three Basic Employees Relations sessions Two Disability Awareness sessions Reviewed and processed 439 RA and 91 premium travel requests within the required timeframes.

An individual that desires to file a complaint can go to https://www.cdc.gov/ other/accessibility.html

The information on Architectural Barriers Act is found at https://www.cdc.gov/ oeeowe/eoguidance/policy.htm#barriers

CDC is committed to complying with federal regulations to improve and advance accessibility of its facilities and technology. Agency leaders from OEEOWE; the Office of Safety, Security, and Asset Management; and the Office of the Chief Information Officer (OCIO) collaborate to proactively identify and improve accessibility of agency facilities and/or technology.

The RA program managed 439 requests for RAs in FY 2023, with 95% closed within 60 days of receiving qualifying information..

**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.

The PAS Policy was approved in August 2019. There were four requests for PAS in FY 2023.

**Section VI: EEO Complaint and Findings Data**

**A. EEO COMPLAINT DATA INVOLVING HARASSMENT**

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

Answer: 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: 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.

While the Agency had complaints alleging harassment based on disability status that resulted in a settlement agreement, the Agency did not have one or more findings of discrimination alleging harassment based on disability status.

**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.

While the Agency had complaints alleging failure to provide a reasonable accommodation that resulted in a settlement agreement, the Agency did not have one or more findings of discrimination involving the failure to provide a reasonable accommodation.

**Section VII: Identification and Removal of Barriers**

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

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

Answer: No

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

Answer: N/A

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

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

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