

**U.S. Equal Employment Opportunity Commission
Federal Agency Annual
EEO Program Status Report**

**Management Directive – 715
Office of Equal Employment Opportunity
Department of Health and Human Services
Centers for Disease Control and Prevention
Agency for Toxic Substances and Disease
Registry**

Management Directive 715
Fiscal Year 2020
PARTS A - D

PART A: Department of Agency Identifying Information

1. **Agency:** Department of Health and Human Services (DHHS)
 - a. **2nd level reporting component:** Centers for Disease Control and Prevention (CDC)
2. **Address:** 1600 Clifton Road
3. **City, State, Zip Code:** Atlanta, GA 30329
4. **Agency Code(s):** CDC HE39 / ATSDR HE35
5. **FIPS code(s):** GA 13089 / MD 24033 / OH 39061 / WV 54061 / PA 42003

PART B: Total Employment

1. **Enter total number of permanent full-time and part-time employees:** 9,645
2. **Enter total number of temporary employees:** 1,167
3. **Enter total number of employees paid from non-appropriated funds:**
4. **TOTAL EMPLOYMENT [add lines 1 through 3]:** 10,812

PART C: Agency Official(s) Responsible for Oversight of EEO Programs(s)

1. **Head of Agency / Official Title:** Rochelle P. Walensky, MD, MPH
Director, CDC/Administrator, ATSDR
2. **Agency Head Designee:** Dia Taylor, MBA, Chief Operating Officer (Acting), CDC/ATSDR
3. **Principal EEO Director:** Reginald R. Mebane, Director, Office of Equal Employment Opportunity (OEEO);
770-488-3227; RMebane@cdc.gov
4. **Affirmative Employment Program Official:** Linnet Griffiths, OEEO Deputy Director, OEEO; 404-639-7517;
LGriffiths1@cdc.gov
5. **Complaint Processing Program Manager:** DeAnna Arcement, Complaints Manager, OEEO; 770-488-3215;
DArcement@cdc.gov
6. **Diversity and Inclusion Officer:** James Nelson, Chief Diversity Officer, OMHHE;
770-488-3171; JNelson2@cdc.gov
7. **Hispanic Program Manager (SEPM):**
8. **Women's Program Manager (SEPM):**
9. **Disability Program Manager:** Linnet Griffiths, OEEO Deputy Director, OEEO; 404-639-7517;
LGriffiths1@cdc.gov
10. **Reasonable Accommodation Program Manager:** Anthony Stockton, RA Manager, OEEO; 770-488-3204;
AStockton@cdc.gov
11. **Anti-Harassment Program Manager:** Casey Redding, Harassment Prevention Advisor, OCOO; 404-639-
0752
12. **ADR Program Manager:** Dana P. Williams, ADR Manager, OEEO; 770-488-3233; DPWilliams@cdc.gov
13. **Principal MD-715 Preparer:** Y. Teresa Brown, Associate Director for Policy, OEEO; 404-498-6606;
YBrown1@cdc.gov
14. **Other:** Lechelle Simmons, Program Analyst, OEEO; 404-718-8088; LSimmons@cdc.gov

PART D: EEOC Forms and Documents Included with This Report Required:

- **Attachment 1:** [CDC Organizational Chart](#)
- **Attachment 2:** [CDC and ATSDR Policy Statement on Equal Employment Opportunity](#)
- **Attachment 3:** [CDC and ATSDR Policy and Procedure on Alternative Dispute Resolution](#)
- **Attachment 4:** [CDC Strategic Framework and Priorities](#)
- **Attachment 5:** [CDC 2020 Annual Report](#)
- **Attachment 6:** [CDC and ATSDR Anti-Harassment Policy and Procedure](#)
- **Attachment 7:** [CDC and ATSDR Policy Statement on Reasonable Accommodations](#)
- **Attachment 8:** [Personal Assistance Services Policy](#)

Additional Supporting Documents Included with This Report

- **Attachment 9:** [CDC and ATSDR Policy on Diversity and Inclusion](#)
- **Attachment 10:** [CDC and ATSDR EEO Strategic Plan 2020 - 2024](#)

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 75 years, CDC scientists and disease detectives have worked around the world to prevent diseases, respond to outbreaks, and strengthen America's public health preparedness, readiness, and resilience. CDC's work in these areas and across public health is dependent upon its core capabilities: world-class data and analytics, state-of-the-art laboratory capacity, a skilled and diverse public health workforce, the ability to respond quickly to outbreaks wherever they occur, and a strong foundation for global health capacity and domestic preparedness.

CDC is organized into four Communities of Practice, each of which includes multiple national centers and offices and is led by a Deputy Director. These Communities of Practice include:

- Infectious Diseases
- Non-Infectious Diseases
- Public Health Service and Implementation Science
- Public Health Science and Surveillance

There is also a National Institute for Occupational Safety and Health and seven offices with direct report to the CDC Director. They include:

- Office of the Associate Director for Communication
- Office of the Associate Director for Policy and Strategy
- Office of the Associate Director for Laboratory Science and Safety
- Office of the Chief of Staff
- Office of the Chief Operating Officer
- Office of Equal Employment Opportunity
- CDC Washington Office

CDC's Centers, Institute, and Offices (CIOs) allow the agency to be responsive and effective when dealing with public health concerns. Each group implements CDC's response in their areas of expertise, while also providing intra-agency support and resource-sharing for cross-cutting issues and specific health threats.

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 DHHS but is managed within CDC. The COVID-19 pandemic is a new and unique threat to global health. In Fiscal Year (FY) 2020, CDC continuously adapted and adjusted operations, leveraging technology to deliver data and guidance to inform decisive action, and learning lessons to help improve response efforts. The population health impact of COVID-19 exposed longstanding inequities that systematically undermined the physical, social, economic, and emotional health of racial and ethnic minority populations and other population groups that are bearing a disproportionate burden of COVID-19. CDC is working to reduce those gaps by learning more about their causes and giving healthcare workers and other frontline employees tools they need to close them, including launching a [COVID-19 Response Health Equity Strategy](#) to reduce health disparities through data-driven approaches.

Although the COVID-19 response was a substantial part of CDC's 2020 efforts, the agency addressed dozens of other public health challenges around the world. CDC staff deployed over 2,600 times in the fight against COVID-

19, but staff also deployed more than 280 times to support other public health responses, including the Ebola outbreak in Africa, the polio eradication effort, the Puerto Rican earthquake, and many others.

Maintaining a Model EEO Program

The U.S. Equal Employment Opportunity Commission (EEOC) [Management Directive 715](#) specifies six essential elements that federal agencies must include to develop and maintain a model EEO program. All federal agencies must conduct an annual assessment of the health of their EEO programs against these elements. Highlights of CDC's accomplishments, deficiencies, and areas for improvement for FY 2020 are as follows:

Essential Element A: Demonstrated Commitment from Agency Leadership

- CDC leadership emphasized the importance of the relationship between employee engagement to the success of the agency through extensive support for participation in the FY 2020 Employee Viewpoint Survey (EVS), which was administered September 21 through November 2, 2020. While the timeframe for administering the survey and the content of the questions changed substantially from prior years, CDC maintained a response rate that exceeded DHHS goals (74.7%). CDC also exceeded DHHS goals for the Employee Engagement Index (76%), which the Office of Personnel Management defines as "the employees' sense of purpose that is evident in their display of dedication, persistence, and effort in their work or overall attachment to their organization and its mission."
- CDC Director and ATSDR Administrator, Robert Redfield, MD, who served from 2018 - 2021, issued ten annual policy statements on October 15, 2019 and again on October 5, 2020. The statements expressed his and the agency's commitment to equal employment opportunity and a discrimination free workplace. The policy statements included information on:
 - Alternative Dispute Resolution (ADR)
 - Sexual Harassment
 - Employment and Reasonable Accommodations for Persons with Disabilities (RA)
 - Equal Employment Opportunity (EEO)
 - Religious Accommodation in the Workplace
 - Statement on Reprisal
 - Workplace Harassment
 - The Federal Equal Opportunity Recruitment Program (FEORP)
 - The Disabled Veteran's Affirmative Action Program (DVAAP)
 - Diversity and Inclusion (D&I)
- In an August 3, 2020, letter to all staff, CDC senior leadership restated its commitment to improving diversity and inclusion at CDC. The letter, which followed a series of meetings in July 2020 to develop an internal plan to improve diversity, equity, and inclusion across CDC, outlined a series of steps senior leaders would implement to advance these efforts including:
 - Elevating and empowering the CDC Diversity and Inclusion Executive Steering Committee (DIESC)
 - Enhancing CIO-driven activities to improve diversity across CDC and holding leaders accountable for a clearly articulated plan to address diversity and inclusion

- Leveraging existing and new relationships with universities, including historically black colleges and universities (HBCUs), and other diverse college programs to enhance pipeline programs and training opportunities
- Increasing funding to the CDC Human Resources Office (HRO) to stand up and support a new recruitment team focused on increasing the diversity of CDC staff through new hires
- Requiring all supervisors, including the senior leadership team, to take unconscious bias training
- Increasing research opportunities to identify effective interventions to reduce disparities and achieve health equity
- Increasing agency-wide and CIO-specific communication to enhance transparency and awareness of the priority activities underway and the state of inclusion across the CDC workforce

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

- On June 9, 2020, the CDC Office of Equal Employment Opportunity (OEEO) published the CDC/ATSDR 2020 – 2024 Equal Employment Opportunity Strategic Plan, which outlined the goals, objectives, and strategies to establish and maintain a model EEO program. At the release of the plan, which was CDC's first, OEEO Director Reginald Mebane wrote, "This plan builds upon the agency's commitment to hire, retain, train, and promote a diverse CDC workforce. It will support the agency's leadership, managers, and employees as we work together to make strides toward ending discrimination and increasing equal employment opportunity." OEEO also published a companion Disability Action Plan that identified specific actions to drive CDC to become a model employer of persons with disabilities.
- September 29, 2020, the OEEO Director presented the annual *State of the Agency* address to CDC senior leaders. The briefing served as the culmination of collaboration throughout the year that included small-group meetings between the OEEO Director and senior leaders in CDC components to discuss targeted support and guidance. The OEEO Director also convened quarterly meetings with agency Employee Resource Groups (ERGs) to share information, facilitate collaboration, and address questions and concerns directly.
- Throughout FY 2020, the OEEO Director met monthly with the EEO Advisory Group, comprised of leaders and staff representing each component within the agency, to advise and recommend management actions, new initiatives, and areas for improvement of equal employment practices, conditions, and policies within the agency.

Essential Element C: Management and Program Accountability

- In FY 2020, CDC enhanced engagement with managers and supervisors to support their ability to fulfill their roles and responsibilities related to EEO.
- CDC launched a new mandatory training for all managers, *The Federal EEO Administrative Compliant Process*, which provides managers and supervisors with step-by-step instructions about the EEO complaint process. A second training, *Harassment Prevention: A Commonsense Approach for Managers*, which launched in FY 2019, remained as a requirement with over 1,900 individuals completing the training.
- OEEO conducted 17 additional trainings for managers and supervisors throughout the year on conflict management, team building, effective communication, and statutory and legal authorities regarding reasonable accommodations. Over 700 managers and supervisors participated in these learning opportunities.
- CDC developed and issued procedures and job aids (e.g., frequently asked questions, timelines) for managers and supervisors regarding the EEO Complaints process, Alternative Dispute Resolution process, and Reassignment as a Reasonable Accommodation.

- OEEO provided consultations to managers and supervisors to answer questions about ADR, Reasonable Accommodation, and EEO complaints and to assist with addressing conflicts at the lowest possible level. The CDC Disability Program also responded to several inquiries and requests for assistance in support of Persons with Disabilities (PWD) and Person with Targeted Disabilities (PWTD).
- CDC expanded communication with all staff through *Better Together: CDC Diversity, Equity & Inclusion*, which was launched in July 2020. *Better Together* is an internal communication channel on CDC's intranet site reinforcing CDC's commitment to creating a diverse, equitable, inclusive, and accessible work environment for each employee. It serves as a platform to share work and best practices across the agency.
- OEEO maintained direct communication with managers, supervisors, and other stakeholders through a quarterly *OEEO Insider* newsletter and monthly *News You Can Use* publication to provide information on trainings, Special Emphasis Programs, and other OEEO efforts, initiatives, and outcomes.
- OEEO collaborated with DHHS' Office of Equal Employment Opportunity, Diversity, & Inclusion (EODI) and CDC's HRO to identify opportunities to strengthen accountability for managers and supervisors through the formal annual performance appraisal process. Changes are anticipated in FY 2022.

Essential Element D: Proactive Prevention of Unlawful Discrimination

- CDC made significant progress toward strengthening processes to identify and eliminate barriers to equal employment opportunity. The agency convened a workgroup to establish a trigger identification process, which is the first step of barrier analysis. The group delivered a comprehensive set of recommendations that included over 75 sources of quantitative and qualitative data to be used to identify triggers for further investigation. These sources include all phases and benefits of employment (i.e., recruitment, hiring, promotions, professional development, employee recognition, separations) and incorporate data that had not been analyzed to identify potential barriers to equal employment opportunity in the past. This work will continue in FY 2021 as the agency convenes a second workgroup to establish processes for the three remaining steps of barrier analysis: investigate to pinpoint barriers, devise and implement action plans to correct identified barriers, and assess success of the plan and adjust as necessary.
- Special Emphasis Programs (SEP) continued to be an integral part of CDC's affirmative employment program in FY 2020. SEPs enhance 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. By participating in SEPs, employees can appreciate, value, understand, and celebrate social and cultural similarities and differences. Senior leaders and employee organizations partnered to provide eight SEPs, many in a fully virtual environment, with the following themes:
 - Dr. M. L. King's Commemorative Celebration - King's 2020 Vision: The Beloved Community - The Fierce Urgency of Now
 - African American History Month: African Americans and the Vote
 - Women's History Month: Valiant Women and the Vote
 - Asian American and Pacific Islander Heritage Month: Unite Our Nation by Empowering Equality
 - Sexual and Gender Minority (often known as LGBTQ+) Pride Month: Community Voices
 - Hispanic Heritage Month: Hispanics: Be Proud of Your Past, Embrace the Future
 - National Disability Employment Awareness Month: Increasing Access and Opportunity: Celebrating 75 years of National Disability Employment Awareness Month and 30 years of the Americans with Disabilities Act
 - National American Indian and Alaska Native Heritage Month: Honoring the Past, Securing the Future
- CDC continued to support Diversity and Inclusion (D&I) Councils within components across the agency, which include leaders and employees in each CIO. Activities included town hall meetings, all hands meetings,

listening sessions, resiliency sessions, and other events, which proved helpful as staff adjusted to fulltime telework, COVID-19 isolation, COVID-19 deployments, and civil and social unrest.

Essential Element E: Efficiency

CDC EEO programs maintained a focus on efficiency, effectiveness, and innovation throughout FY 2020. Each of the teams made a seamless transition from in-person services to almost completely virtual services in support of CDC employees.

- The EEO Complaints Team managed 168 contacts from leaders and employees, 42 counseling sessions at the pre-complaints stage, and 26 new formal complaints filed. The top three bases for complaints were disability, reprisal, and race, and the top three issues were harassment (non-sexual), telework/time and attendance, and performance evaluations. The EEO Complaints Team achieved 100% compliance with pre-complaint counseling requirements and completed 92% of formal investigations within the required 180 days.
- The Reasonable Accommodation (RA) Team managed 326 requests in FY 2020, with 97% closed within 60 days of receiving qualifying information. The top three accommodations provided were modified work schedules, sign language interpretation, and other than coach class travel. The RA Team also partnered with the CDC Office of the Chief Information Officer to initiate a complete overhaul of the Accommodation Tracking System (ATS) to streamline management of RA requests and better manage RA case information in a secure environment.
- The Alternative Dispute Resolution (ADR) Team managed 221 ADR cases in FY 2020, including 69 new requests for mediation. The top three issues in mediation were annual performance plans, conflicts with supervisors, and harassment/hostile work environment. The ADR Team also launched *ADR Engage*, which is a secure, electronic system that enables employees to submit confidential requests and serves as the data management system for ADR services.
- The CDC Disability Program (DP) collaborated with the Office of Safety, Security, and Asset Management (OSSAM) to conduct three structural accessibility assessments, and with the CDC Employee Assistance Program and the National Center on Birth Defects and Developmental Disabilities to provide training, career coaching, mentoring, and support for disabled veterans, PWD, and PWTD. The DP also launched *CDC Disability A.W.A.R.E* (Automated. Web. Access. Resource. Exchange.), which is an online repository of information and resources for all employees.

Essential Element F: Responsiveness and Legal Compliance

- 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.
- In FY 2020, CDC experienced a decrease in formal EEO Complaints and RA requests of 34% and 33% respectively, compared to FY 2019. The agency experienced a 12% increase in ADR cases over 2019. All programs exceeded benchmarks for timely and full compliance with EEOC regulations, settlement agreements, and other orders for processes and procedures managed at CDC.
- The DHHS EEO/ADI Director is responsible for issuance of final agency decisions (FADs) for all Operating Divisions within DHHS. In the past, DHHS experienced significant delays in timely issuance of FADs and in FY 2019 established a corrective action plan to address the deficiency. DHHS implemented several steps in the corrective action plan in FY 2020, including streamlining the process to issue Final Orders, and anticipates correcting the remaining backlog of FADs by 12/31/2022.

Workforce Data Highlights

In accordance with Section 717 of Title VII, federal agencies must take proactive steps to ensure equal employment opportunity for all their employees and applicants for employment. To satisfy this requirement, CDC analyzed data in the DHHS Enterprise Human Capital Management (EHCM) system and used the National Civilian Labor Force (CLF) standards¹ as the primary external benchmark.

As noted in FY 2019, DHHS identified deficiencies related to the integrity of the department's data and data systems, which CDC utilizes to meet MD-715 requirements. Before CDC can provide data and analyze trends with confidence, DHHS must implement changes to ensure the integrity of the data. Accordingly, during the next fiscal year, DHHS will improve data systems, data collection methods, reporting mechanisms, and use of the data with the goal of ensuring that DHHS data is accurate and comprehensive to permit trend analysis for assessing compliance with MD-715 requirements. Accordingly, DHHS, including CDC, will not assess whether barriers or triggers may exist until after FY 2022, when DHHS has compiled enough accurate data to establish trends to make informed assessments.

¹ CLF figures taken from the [2014-2018 American Community Survey Equal Employment Opportunity Tabulation](#) (Citizens)

Total Workforce

a. Gender, Race, and National Origin

As of September 30, 2020, CDC maintained a permanent workforce of 9,645 full-time and part-time employees, up approximately 5.0% from the 9,186 employees reported in FY 2019. Of the 9,645 employees, 3,280 (34.0%) were males and 6,365 (66.0%) were females. The percentage of males at 34.0% was significantly below the CLF of 51.8%, while the percentage of females at 66.0% was significantly above the CLF of 48.3%.

The distribution of the FY 2020 CDC workforce by race, national origin, gender, and reported disability was as follows:

- i. Hispanic or Latino males represented 1.2% or 116 employees
- ii. Hispanic or Latina females represented 1.9% or 184 employees
- iii. White males represented 21.0% or 2,030 employees
- iv. White females represented 32.8% or 3,162 employees
- v. Black or African American males represented 8.4% or 807 employees
- vi. Black or African American females represented 24.8% or 2,393 employees
- vii. Asian males represented 3.2% or 306 employees
- viii. Asian females represented 5.9% or 570 employees
- ix. Native Hawaiian or Other Pacific Islander males represented 0.1% or 5 males
- x. Native Hawaiian or Other Pacific Islander females represented 0.1% or 6 females
- xi. American Indian or Alaska Native males represented 0.1% or 12 employees
- xii. American Indian or Alaska Native females represented 0.4% or 43 employees
- xiii. Two or More Races males represented <0.1% or 4 employees
- xiv. Two or More Races females represented 0.1% or 7 employees
- xv. Persons with Disabilities represented 16.0% or 1,545 employees
- xvi. Persons with Targeted Disabilities represented 2.1% or 207 employees

A review of the race, national origin, and gender of CDC employees when compared against the relevant CLF shows that the participation rates of Asian females and males, Black or African American females and males, Black or African American males, and White females exceed their respective CLF rates. Additionally, the participation rate of American Indian females as well as Native Hawaiian or Other Pacific Islander females and males were comparable to its CLF rate; however, the participation rates of American Indian or Alaska Native males, Hispanic or Latino males and females, Two or More Races males and females, and White males are below their respective CLF rates.

b. Persons with Disabilities and Persons with Targeted Disabilities

The Equal Employment Opportunity Commission (EEOC) provides federal agencies certain standards as the benchmark for assessing whether any triggers exist regarding persons with disabilities and persons with targeted disabilities. For the total workforce, the percentage of

persons with disabilities increased from 14.9% to 16.0%, exceeding EEOC's benchmark of 12%. In addition, the percentage of persons with targeted disabilities remained unchanged at 2.1% also exceeding EEOC's benchmark of 2%. The EEOC requires federal agencies to adopt employment goals for persons with disabilities and persons with targeted disabilities.

1. Grade Levels

a. Gender, Race, and National Origin

In FY 2020, CDC had 76 (0.8%) employees at the SES/Senior Pay grades, 881 (9.1%) employees at the GS-15 grade, 2,298 (23.8%) employees at the GS-14 grade, and 3,207 (33.3%) employees at the GS-13 grade.

For the SES and other senior pay grades, the participation rates of White males and females as well as Asian males and females exceeded their respective CLF rate, while the participation rates of Black or African American females was comparable to their respective CLF rates. However, the participation rate of Hispanic or Latino males and females, Two or More Races/Unknown Races males and females, Black or African American males, American Indian or Alaska Native males and females, Native Hawaiian or Other Pacific Islander males and females were below their respective CLF rates.

For the GS-15 grade, the participation rates of White males and females, Black or African or American females, Asian males and females exceeded their respective CLF rate. However, the participation rate of Hispanic or Latino males and females, Two or More Races/Unknown Races males and females, Black or African American males, American Indian or Alaska Native males and females, Native Hawaiian or Other Pacific Islander males and females were below their respective CLF rates

For the GS-14 grade, the participation rates of White females, Black or African or American males and females, Asian males and females, and American Indian or Alaska Native females exceeded their respective CLF rate, while the participation rates of Native Hawaiian or Other Pacific Islander males were comparable to their respective CLF rates. However, the participation rate of American Indian or Alaska Native males, Hispanic or Latino males and females, Native Hawaiian or Other Pacific Islander females, Two or More Races/Unknown Races males, and White males were below their respective CLF rates.

For the GS-13 grade, the participation rates of White females, Black or African or American males and females, Asian males and females, exceeded their respective CLF rate, while the participation rates of American Indian or Alaska Native females and Native Hawaiian or Other Pacific Islander males and females were comparable to their respective CLF rates. However, the participation rate of White males, Hispanic or Latino males and females, Two or More Races/Unknown Races males and females, and American Indian or Alaska Native males were below their respective CLF rates.

2. New Hires

a. Gender, Race and National Origin

In FY 2020, the agency hired 691 new employees. This includes 221 (32.0%) males and 470 (68.0%) females, with hiring of males significantly below the CLF and the hiring of females significantly above the CLF. Additionally, the hiring of Hispanic and Latino males and females, 2 or More Races/Unknown Races males and females, and White males was below the CLF, while the hiring of Asian males and Native Hawaiian or Other Pacific Islander females was comparable with the CLF. The hiring of Black or African American males and females, American Indian or Alaska Native males and females, Asian females and White females was above the CLF.

b. Persons with Disabilities and Persons with Targeted Disabilities

Of the 691 new hires in FY 2020, 29.1% identified as having a disability and 3.0% identified as having a targeted disability. See Part J, *Special Program Plan for the Recruitment, Hiring, Advancement, and Retention of Persons with Disabilities*, for additional data and information.

4. Mission Critical Occupations

CDC has 10 Mission Critical Occupations (MCOs) – General Health Science (series 0601), Miscellaneous Administration and Program (series 0301), Management and Program Analysis (series 0343), Information Technology Management (series 2210), Public Health Program Specialist (series 0685), Medical Officer (series 0602), Chemistry (series 1320), Statistician (series 1530), General Biological Science (series 0401), and Microbiology (series 0403)². These MCOs comprise 68.8% of the CDC workforce. This section analyzes MCO employment by gender, race, national origin, and disability in comparison to its respective Occupational CLFs (OCLF)³.

a. General Health Science (Series 0601)

These employees comprise 18.3% of the workforce. In FY 2020, the participation rates in comparison to its respective Occupational CLFs (OCLF) were as follows:

i. Gender, Race and National Origin

² Handbook of Occupational Groups and Families, <https://www.bls.gov/publications/handbook/occupational-groups-and-families>

In FY 2020, the participation rates of males comprised 29.7% of the MCO with an OCLF of 23.4%, while females comprised 70.3% of the MCO with an OCLF of 76.6%.

The participation rates of Black or African American males and females, Asian females and males, and White males were above their respective OCLF rates while the participation rates of American Indian or Alaska Native males and females as well as Native Hawaiian or Other Pacific Islander males and females were comparable to their respective OCLF rates.

The participation rates of 2 or More Races/Unknown Races males and females, Hispanic or Latino males and females, and White females were below their respective OCLF rates.

ii. [Persons with Disabilities and Persons with Targeted Disabilities](#)

In FY 2020, the participation rates in the General Health Science MCO for persons with disabilities was 8.1%, 3.9% below EEOC's 12% benchmark, and for persons with targeted disabilities was 0.7%, 1.3% below EEOC's 2% benchmark.

b. [Miscellaneous Administration and Program \(Series 0301\)](#)

These employees comprise 6.4% of the workforce. In FY 2020, the participation rates in comparison to its respective Occupational CLFs (OCLF) were as follows:

i. [Gender, Race and National Origin](#)

In FY 2020, the participation rates of males comprised 19.6% of the MCO with an OCLF of 69.1%, while females comprised 80.4% of the MCO with an OCLF of 30.9%.

The participation rates of Black or African American males and females, American Indian or Alaska Native females, and Native Hawaiian or Other Pacific Islander females were above their respective OCLF rates.

The participation rates White males and females, Hispanic or Latino males and females, Asian males and females, Two or More Races/Unknown Races males and females, American Indian or Alaska Native males, Native Hawaiian or Other Pacific Islander males, were below their respective OCLF rates.

ii. [Persons with Disabilities and Persons with Targeted Disabilities](#)

In FY 2020, the participation rates in the Miscellaneous Administration and Program MCO for persons with disabilities was 34.1%, exceeding EEOC's 12% benchmark, and for persons with targeted disabilities was 4.7% exceeding EEOC's 2% benchmark.

c. Management and Program Analysis (Series 0343)

These employees comprise 4.1% of the workforce. In FY 2020, the participation rates in comparison to its respective Occupational CLFs (OCLF) were as follows:

i. Gender, Race and National Origin

In FY 2020, the participation rates of males comprised 18.6% of the MCO with an OCLF of 63.5%, while females comprised 81.4% of the MCO with an OCLF of 36.5%.

The participation rates of Black or African American males and females, American Indian or Alaska Native females, and Asian females were above their respective OCLF rates while Native Hawaiian or Other Pacific Islander females were comparable.

The participation rates of White males and females, Hispanic or Latino males and females, Asian males, Two or More Races/Unknown Races males and females, American Indian or Alaska Native males, Native Hawaiian or Other Pacific Islander males, were below their respective OCLF rates.

ii. Persons with Disabilities and Persons with Targeted Disabilities

In FY 2020, the participation rates in the Management and Program Analysis MCO for persons with disabilities was 31.4%, exceeding EEOC's 12% benchmark, and for persons with targeted disabilities 5.0%, exceeding EEOC's 2% benchmark.

d. Information Technology Management (Series 2210)

These employees comprise 5.7% of the workforce. In FY 2020, the participation rates in comparison to its respective Occupational CLFs (OCLF) were as follows:

i. Gender, Race and National Origin

In FY 2020, the participation rates of males comprised 67.8% of the MCO with an OCLF of 73.2%, while females comprised 32.2% of the MCO with an OCLF of 26.8%.

The participation rates of American Indian or Alaska Native males and females, Asian females, Black or African American males and females, and Native Hawaiian or Other Pacific Islander males were above their respective OCLF rates while Native Hawaiian or Other Pacific Islander females were comparable.

The participation rates of Two or More Races/Unknown Races males and females, Asian males, Hispanic or Latino males and females, and White males and females were below their respective OCLF rates.

ii. [Persons with Disabilities and Persons with Targeted Disabilities](#)

In FY 2020, the participation rates in the Information Technology Management MCO for persons with disabilities was 19.4%, exceeding EEOC's 12% benchmark, and for persons with targeted disabilities 2.2%, exceeding EEOC's 2% benchmark.

e. [Public Health Program Specialist \(Series 0685\)](#)

These employees comprise 20.4% of the workforce. In FY 2020, the participation rates in comparison to its respective Occupational CLFs (OCLF) were as follows:

i. [Gender, Race and National Origin](#)

In FY 2020, the participation rates of males comprised 25.0% of the MCO with an OCLF of 24.6%, while females comprised 75.0% of the MCO with an OCLF of 75.4%.

The participation rates of American Indian or Alaska Native males, Asian males and females, Black or African American males and females were above their respective OCLF rates while American Indian or Alaska Native females, and Native Hawaiian or Other Pacific Islander males were comparable.

The participation rates of 2 or More Races/Unknown Races males and females, Hispanic or Latino males and females, Hispanic or Latino males, White males and females were below their respective OCLF rates.

ii. [Persons with Disabilities and Persons with Targeted Disabilities](#)

In FY 2020, the participation rates in the Public Health Program Specialist MCO for persons with disabilities was 13.8%, exceeding EEOC's 12% benchmark, and for persons with targeted disabilities 2.2%, exceeding EEOC's 2% benchmark.

f. [Medical Officer \(Series 0602\)](#)

These employees comprise 3.1% of the workforce. In FY 2020, the participation rates in comparison to its respective Occupational CLFs (OCLF) were as follows:

i. [Gender, Race and National Origin](#)

In FY 2020, the participation rates of males comprised 46.9% of the MCO with an OCLF of 48.2%, while females comprised 53.1% of the MCO with an OCLF of 51.8%.

The participation rates of American Indian or Alaska Native males and females, Asian females, Black or African American males, and White males and female were above their respective OCLF rates while Native Hawaiian or Other Pacific Islander males and females were comparable.

Furthermore, the participation rates of Two or More Races/Unknown Races males and females, Asian males, Black or African American females, and Hispanic or Latino males and females were below their respective OCLF rates.

ii. [Persons with Disabilities and Persons with Targeted Disabilities](#)

In FY 2020, the participation rates in the Medical Officer MCO for persons with disabilities was 6.6%, 5.4% below EEOC's 12% benchmark, and for persons with targeted disabilities 0.3%, 1.7% below EEOC's 2% benchmark.

g. [Chemistry \(Series 1320\)](#)

These employees comprise 1.4% of the workforce. In FY 2020, the participation rates in comparison to its respective Occupational CLFs (OCLF) were as follows:

i. [Gender, Race and National Origin](#)

In FY 2020, the participation rates of males comprised 43.4% of the MCO with an OCLF of 58.9%, while females comprised 56.6% of the MCO with an OCLF of 41.1%.

The participation rates of White females, Asian females, and Hispanic or Latino females were above their respective OCLF rates while Native Hawaiian or Other Pacific Islander males and females were comparable.

The participation rates of Two or More Races/Unknown Races males and females, American Indian or Alaska Native males and females, Asian males, Black or African American males and females, Hispanic or Latino males, and White males were below their respective OCLF rates.

ii. [Persons with Disabilities and Persons with Targeted Disabilities](#)

In FY 2020, the participation rates in the Chemistry MCO for persons with disabilities was 11.0%, 1.0% below EEOC's 12% benchmark, and for persons with targeted disabilities 0.7%, 1.3% below EEOC's 2% benchmark.

h. [Statistician \(Series 1530\)](#)

These employees comprise 2.1% of the workforce. In FY 2020, the participation rates in comparison to its respective Occupational CLFs (OCLF) were as follows:

i. [Gender, Race and National Origin](#)

In FY 2020, the participation rates of males comprised 34.5% of the MCO with an OCLF of 53.1%, while females comprised 65.5% of the MCO with an OCLF of 46.9%.

The participation rates of Asian females, Black or African American males and females, Native Hawaiian or Other Pacific Islander males and females, and White females were above their respective OCLF rates.

The participation rates of 2 or More Races/Unknown Races males and females, American Indian or Alaska Native males and females, Asian males, Hispanic or Latino males and females, and White males were below their respective OCLF rates.

ii. [Persons with Disabilities and Persons with Targeted Disabilities](#)

In FY 2020, the participation rates in the Statistician MCO for persons with disabilities was 7.0%, 5.0% below EEOC's 12% benchmark, and for persons with targeted disabilities 1.0%, 1.0 below EEOC's 12% benchmark.

i. [General Biological Science \(Series 0401\)](#)

These employees comprise 3.6% of the workforce. In FY 2020, the participation rates in comparison to its respective Occupational CLFs (OCLF) were as follows:

i. [Gender, Race and National Origin](#)

In FY 2020, the participation rates of males comprised 36.9% of the MCO with an OCLF of 50.3%, while females comprised 63.1% of the MCO with an OCLF of 49.7%.

The participation rates of American Indian or Alaska Native females, Asian males and females, and Black or African American males and females were above their respective OCLF rates while Native Hawaiian or Other Pacific Islander females were comparable.

Additionally, the participation rates of Two or More Races/Unknown Races males and females, American Indian or Alaska Native males, Hispanic or Latino males and females, Native Hawaiian or Other Pacific Islander males, and White males and females were below their respective OCLF rates.

ii. [Persons with Disabilities and Persons with Targeted Disabilities](#)

In FY 2020, the participation rates in the General Biological Science MCO for persons with disabilities was 4.6%, 7.4% below EEOC's 12% benchmark, and for persons with targeted disabilities 1.1%, 0.9% below EEOC's 2% benchmark.

j. [Microbiology \(Series 0403\)](#)

These employees comprise 3.6% of the workforce. In FY 2020, the participation rates in comparison to its respective Occupational CLFs (OCLF) were as follows:

i. **Gender, Race and National Origin**

In FY 2020, the participation rates of males comprised 42.3% of the MCO with an OCLF of 50.3%, while females comprised 57.7% of the MCO with an OCLF of 49.7%. The participation rates of American Indian or Alaska Native females, Asian males and females, Black or African American males and females, Native Hawaiian or Other Pacific Islander males and females, and White females were above their respective OCLF rates while Hispanic or Latino males were comparable.

Additionally, the participation rates of Two or More Races/Unknown Races males and females, American Indian or Alaska Native males, Hispanic or Latino females, Native Hawaiian or Other Pacific Islander males, and White males were below their respective OCLF rates.

ii. **Persons with Disabilities and Persons with Targeted Disabilities**

In FY 2020, the participation rates in the Microbiology MCO for persons with disabilities was 5.4%, 6.6% below EEOC's 12% benchmark, and for persons with targeted disabilities 0.6%, 1.4% below EEOC's 12% benchmark.

Planned Activities

In FY 2021 and FY 2022, CDC will continue the work launched in 2020 and expand efforts to:

- Collaborate with DHHS EEODI to correct deficiencies related to data integrity and issuance of timely FADs
- Collaborate with DHHS EEODI and CDC HRO to:
 - Resurvey the CDC workforce to ensure accurate and up to date demographic data about CDC's workforce
 - Strengthen evaluation of manager and supervisor commitment to EEO by including mandatory and measurable elements in annual performance plans
- Develop an ADR and anti-harassment policy and revise the RA policy
- Implement a CDC harassment prevention program

- Develop and launch additional training for managers and supervisors, including mandatory diversity and inclusion, unconscious bias, and microaggressions training
- Finalize and implement CDC procedures and practices for comprehensive barrier identification and elimination across all phases of the employment life cycle
- Increase use of technology and innovative practices to enhance efficiency of EEO services.
- Increase communication with CDC staff, including the development of the first OEEO Annual Report, an “Ask the EEO manager” and “Ask the ADR manager” lunch and learn series, and an overhaul of the OEEO intranet site to include additional resources and information and improve useability.

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.

PART G: SELF-ASSESSMENT CHECKLIST

The Part G Self-Assessment Checklist is a series of questions designed to provide federal agencies with an effective means for conducting the annual self-assessment required in Part F of MD-715. This self-assessment permits EEO Directors to recognize, and to highlight for their senior staff, deficiencies in their EEO program that the agency must address to comply with MD-715's requirements. Nothing in Part G prevents agencies from establishing additional practices that exceed the requirements set forth in this checklist.

All agencies will be required to submit Part G to EEOC. Although agencies need not submit documentation to support their Part G responses, they must maintain such documentation on file and make it available to EEOC upon request.

The Part G checklist is organized to track the MD-715 essential elements. As a result, a single substantive matter may appear in several different sections, but in different contexts. For example, questions about establishing an anti-harassment policy fall within Element C (Management and Program Accountability), while questions about providing training under the anti-harassment policy are found in Element A (Demonstrated Commitment from Agency Leadership).

For each MD-715 essential element, the Part G checklist provides a series of "compliance indicators." Each compliance indicator, in turn, contains a series of "yes/no" questions, called "measures." To the right of the measures, there are two columns, one for the agency to answer the measure with "Yes", "No", or "NA;" and the second column for the agency to provide "comments", if necessary. Agencies should briefly explain any "N/A" answer in the comments. For example, many of the sub-component agencies are not responsible for issuing final agency decisions (FADs) in the EEO complaint process, so it may answer questions about FAD timeliness with "NA" and explain in the comments column that the parent agency drafts all FADs.

A "No" response to any measure in Part G is a program deficiency. For each such "No" response, an agency will be required in Part H to identify a plan for correcting the identified deficiency. If one or more sub-components answer "No" to a particular question, the agency-wide/parent agency's report should also include that "No" response.

Table A1 - Demonstrated Commitment from Agency Leadership









 Compliance Indicator  Measures	A.1 – The agency issues an effective, up-to-date EEO policy statement	Measure Met? (Yes/No/NA)	Comments FY 2020
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	Oct 5, 2020
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

 Compliance Indicator  Measures	A.2 – The agency has communicated EEO policies and procedures to all employees.	Measure Met? (Yes/No/NA)	Comments FY 2020
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)]	No	CDC published the policy March 2021, after approval by EEOC
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	

 Compliance Indicator  Measures	A.2 – The agency has communicated EEO policies and procedures to all employees.	Measure Met? (Yes/No/NA)	Comments FY 2020
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/eo/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

 Compliance Indicator  Measures	A.2 – The agency has communicated EEO policies and procedures to all employees.	Measure Met? (Yes/No/NA)	Comments FY 2020
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.	No	The CDC Anti-Harassment Policy was finalized and disseminated to all employees in March 2021. The harassment prevention program is being implemented in FY 2021, including training for CDC leaders and employees.





 Compliance Indicator  Measures	A.2 – The agency has communicated EEO policies and procedures to all employees.	Measure Met? (Yes/No/NA)	Comments FY 2020
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

 Compliance Indicator  Measures	A.3 – The agency assesses and ensures EEO principles are part of its culture.	Measure Met? (Yes/No/NA)	Comments FY 2020
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	CDC Honor Awards for Excellence in Human Capital Management – Workforce Diversity, which highlighted ten groups and individuals across CDC in FY 2020
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



 Compliance Indicator  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 2020
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	None
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.	No	None
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)]	No	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	September 29, 2020
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 OEE0 into the Agency’s Strategic Mission



 Compliance Indicator  Measures	B.2 – The EEO Director controls all aspects of the EEO program.	Measure Met? (Yes/No/NA)	Comments FY 2020
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	Final Agency Decisions issued by HHS
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 OEE0 into the Agency's Strategic Mission





 Compliance Indicator  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 2020
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.	No	In June 2020, CDC published its first five-year EEO Strategic Plan, which is attached to this report. In addition, CDC published a new strategic framework and annual report (https://www.cdc.gov/about/organization/strategic-framework/index.html) in December 2020 that highlighted the importance of EEO and diversity and inclusion principles in achieving the agency's mission.

Table B4 - Integration of OEE0 into the Agency's Strategic Mission

 Compliance Indicator  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 2020
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	Final Agency Decisions are issued by HHS
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)]	N/A	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



 Compliance Indicator  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 2020
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]	No	The CDC Anti-Harassment Policy was finalized and disseminated to all employees in March 2021. The harassment prevention program is being implemented in FY 2021.
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





 Compliance Indicator  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 2020
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)]	No	The CDC Anti-Harassment Policy was published in March 2021. Training will be provided in FY 2021.
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

 Compliance Indicator  Measures	B.6 – The agency involves managers in the implementation of its EEO program.	Measure Met? (Yes/No/NA)	Comments FY 2020
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)]	N/A	The agency completed a Hispanic barrier analysis in late FY 2020. An action plan is under development in FY 2021 and will be implemented with support from senior managers and other stakeholders.

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







 Compliance Indicator  Measures	C.1 – The agency conducts regular internal audits of its component and field offices.	Measure Met? (Yes/No/NA)	Comments FY 2020
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.	N/A	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.	N/A	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)]	N/A	No subordinate level components

Table 5 - Management and Program Accountability

 Compliance Indicator  Measures	C.2 – The agency has established procedures to prevent all forms of EEO discrimination.	Measure Met? (Yes/No/NA)	Comments FY 2020
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)]	No	CDC's Anti-Harassment Policy was published March 2021, after review and approval by EEOC.
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]	N/A	CDC's Anti-Harassment Policy, published March 2021, meets all EEOC requirements.
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)]	N/A	The harassment prevention program sits outside OEEO.

 Compliance Indicator  Measures	C.2 – The agency has established procedures to prevent all forms of EEO discrimination.	Measure Met? (Yes/No/NA)	Comments FY 2020
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.]	N/A	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 <u>Complainant v. Dep’t of Veterans Affairs</u> , EEOC Appeal No. 0120123232 (May 21, 2015); <u>Complainant v. Dep’t of Defense (Defense Commissary Agency)</u> , 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)]	N/A	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





 Compliance Indicator  Measures	C.2 – The agency has established procedures to prevent all forms of EEO discrimination.	Measure Met? (Yes/No/NA)	Comments FY 2020
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/eo/ra/policy.htm

Table C3 - Management and Program Accountability

 Compliance Indicator  Measures	C.3 - The agency evaluates managers and supervisors on their efforts to ensure equal employment opportunity.	Measure Met? (Yes/No/NA)	Comments FY 2020
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?	Yes	CDC currently includes an element related to commitment to EEO in all supervisor and manager performance plans; however, the agency recognizes a need for a stronger element and evaluation process. HHS EEODI is leading a department initiative to strengthen elements for all managers and supervisors.
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	CDC requires manager and supervisor participation in conflict resolution, including participation in ADR proceedings; however, there is currently no process to incorporate this into the formal performance appraisals. HHS EEODI is leading a department initiative to strengthen evaluation of managers and supervisors based on EEO activities.
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	HHS EEODI is leading a department initiative to strengthen evaluation of managers and supervisors based on EEO activities.
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	HHS EEODI is leading a department initiative to strengthen evaluation of managers and supervisors based on EEO activities.

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	HHS EEOI is leading a department initiative to strengthen evaluation of managers and supervisors based on EEO activities.
C.3.b.5	Provide religious accommodations when such accommodations do not cause an undue hardship? [see 29 CFR §1614.102(a)(7)]	No	HHS EEOI is leading a department initiative to strengthen evaluation of managers and supervisors based on EEO activities.
C.3.b.6	Provide disability accommodations when such accommodations do not cause an undue hardship? [see 29 CFR §1614.102(a)(8)]	No	CDC ensures that accommodations are provided when they do not cause an undue hardship; however, there is currently no process to incorporate this into formal performance appraisals for managers and supervisors. HHS EEOI is leading a department initiative to strengthen evaluation of managers and supervisors based on EEO activities.

C.3.b.7	Support the EEO program in identifying and removing barriers to equal opportunity. [see MD-715, II(C)]	No	HHS EEOI is leading a department initiative to strengthen evaluation of managers and supervisors based on EEO activities.
C.3.b.8	Support the anti-harassment program in investigating and correcting harassing conduct. [see Enforcement Guidance, V.C.2]	N/A	CDC's Anti-Harassment Policy was published March 2021. HHS EEOI is leading a department initiative to strengthen evaluation of managers and supervisors based on EEO activities.
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; however, there is currently no process to incorporate this into formal performance appraisals for managers and supervisors. HHS EEOI is leading a department initiative to strengthen evaluation of managers and supervisors based on EEO activities.

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



 Compliance Indicator  Measures	C.4 – The agency ensures effective coordination between its EEO programs and Human Resources (HR) program.	Measure Met? (Yes/No/NA)	Comments FY 2020
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	See statement in Executive Summary Workforce Analysis and attached HHS Action Plan
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 to Section II(C) of MD-715, does the EEO office collaborate with the HR office to:		
C.4.e.1	Implement the Affirmative Action Plan for Individuals with Disabilities? [see 29 CFR §1614.203(d); MD-715, II(C)]	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





 Compliance Indicator  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 2020
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 <u>Douglas v. Veterans Administration</u> , 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	Awaiting update
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

 Compliance Indicator  Measures	C.6 – The EEO office advises managers/supervisors on EEO matters.	Measure Met? (Yes/No/NA)	Comments FY 2020
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 and meets with senior leaders of CDC components periodically throughout the year.
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

 Compliance Indicator  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 2020
D.1.a	Does the agency have a process for identifying triggers in the workplace? [see MD-715 Instructions, Sec. I]	Yes	None





 Compliance Indicator  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 2020
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]	No	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

 Compliance Indicator  Measures	D.2 – The agency identifies areas where barriers may exclude EEO groups (reasonable basis to act.)	Measure Met? (Yes/No/NA)	Comments FY 2020
D.2.a	Does the agency have a process for analyzing the identified triggers to find possible barriers? [see MD-715, (II)(B)]	No	The OEEO Director convened a workgroup to formalize procedures for trigger identification, which were completed in late FY 2020. In FY 2021, a subsequent workgroup is establishing procedures for each of the remaining three steps of barrier analysis.
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)]	No	CDC hired staff and established processes to examine all management/personnel policies by race, national origin, sex, and disability. Examination of the impact of procedures and practices on various groups will be incorporated into barrier analysis efforts.
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 reorganizations and realignments? [see 29 CFR §1614.102(a)(3)]	Yes	None

D.2.d	<p>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.</p>	No	<p>The OEEO Director convened a workgroup to formalize procedures for trigger identification, which were completed in late FY 2020. In FY 2021, a subsequent workgroup is establishing procedures for each of the remaining three steps of barrier analysis.</p>
--------------	--	----	--

Table D3 - Proactive Prevention





 Compliance Indicator  Measures	D.3 – The agency establishes appropriate action plans to remove identified barriers.	Measure Met? (Yes/No/NA)	Comments FY 2020
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 did not identify one or more barriers during the reporting period; however, the agency continued to implement the action plan for the Hispanic barrier analysis that was completed in FY 2019.
D.3.c	Does the agency periodically review the effectiveness of the plans? [see MD-715, II(D)]	N/A	In late FY 2020, CDC established an action plan to address barriers identified through the Hispanic barrier analysis. CDC will develop metrics and benchmarks to assess effectiveness in FY 2021.



Table D4 - Proactive Prevention

 Compliance Indicator  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 2020
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/eeo/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

 Compliance Indicator  Measures	E.1 - The agency maintains an efficient, fair, and impartial complaint resolution process.	Measure Met? (Yes/No/NA)	Comments FY 2020
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 to 29 CFR §1614.105(b)(1)?	Yes	None
E.1.c	Does the agency issue acknowledgment letters immediately upon receipt of a formal complaint, pursuant to MD-110, Ch. 5(l)?	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(l)? If so, please provide the average processing time in the comments.	Yes	The agency averages 8 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 to 29 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 to 29 CFR §1614.110(b)?	N/A	Final Agency Decisions are issued by HHS
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)?	N/A	Final Agency Decisions are issued by HHS
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.	N/A	HHS manages a contract for the department.

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



 Compliance Indicator  Measures	E.2 – The agency has a neutral EEO process.	Measure Met? (Yes/No/NA)	Comments FY 2020
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 OEEO.
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)]	N/A	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, <i>Attaining a Model Agency Program: Efficiency</i> (Dec. 1, 2004)	Yes	None

Table E3 - Efficiency



 Compliance Indicator  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 2020
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





 Compliance Indicator  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 2020
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)]	N/A	See statement in Executive Summary Workforce Analysis and attached HHS Action Plan
E.4.a.3	Recruitment activities? [see MD-715, II(E)]	N/A	See statement in Executive Summary Workforce Analysis and attached HHS Action Plan
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)]	N/A	See statement in Executive Summary Workforce Analysis and attached HHS Action Plan
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]	No	The harassment prevention program will be fully established in FY 2021.
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	See statement in Executive Summary Workforce Analysis and attached HHS Action Plan.

Table E5 - Efficiency

 Compliance Indicator  Measures	E.5 – The agency identifies and disseminates significant trends and best practices in its EEO program.	Measure Met? (Yes/No/NA)	Comments FY 2020
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 and provided accommodations, participation in EEO training, and participation in Special Emphasis Programs.
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 and Deputy, and managers meet regularly with representatives from other HHS Operating Divisions, share CDC best practices, and consider best practices 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



 Compliance Indicator  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 2020
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





 Compliance Indicator  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 2020
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

 Compliance Indicator  Measures	F.3 - The agency reports to EEOC its program efforts and accomplishments.	Measure Met? (Yes/No/NA)	Comments FY 2020
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 H

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.

If the agency did not address any deficiencies during the reporting period, please check the box.

Statement of Model Program Essential Element Deficiency

Compliance Indicator	Brief Description of Program Deficiency
A.2.a.1; B.4.a.9; C.2.a; E.4.a.6	CDC does not currently have an Anti-Harassment Policy or Program.

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)
10/01/2015	Develop an Anti-Harassment Policy and Program.	09/30/2017	12/31/2020	03/11/2021
10/01/2015	Establish an Anti-Harassment Program	09/30/2017	09/30/2021	

Responsible Official(s)

Title	Name	Performance Standards Address the Plan? (Yes or No)
Director, Office of Equal Employment Opportunity	Reginald R. Mebane	No
Chief Operating Officer (Acting)	Dia Taylor	No

Target Data (mm/dd/yyyy)	Planned Activities	Sufficient Funding & Staffing? (Yes or No)	Modified Date (mm/dd/yyyy)	Completion Date (mm/dd/yyyy)
9/30/2019	<p>Develop policy and program to provide prompt investigation of allegations harassment outside of the EEO complaint process.</p> <p>Highlights will include –</p> <ul style="list-style-type: none"> • Investigations will be conducted by external, contract investigators, or by managers trained to conduct investigations, • Investigation will be initiated within 5 calendar days of the allegation. • All allegations of harassment will be investigated. • All investigations will be completed within 30 calendar days of the allegation. • Appropriate and timely disciplinary action will be taken when there is a finding of harassment. • Employees will continue to have the option of filing an EEO Complaint concurrently. • Employees who raise allegations that do not rise to the level of harassment (e.g., those where there is no protected basis), may opt to utilize the procedures that were established to address bullying. 	Yes	9/30/2020	03/22/2021
10/01/2019	<p>Modify existing policy statement on the Prevention of Harassment to align with the components of the Anti-harassment Program.</p>	Yes		03/22/2021

12/31/2020	Harassment Prevention Program implementation	Yes	09/30/2021	
------------	--	-----	------------	--

Report of Accomplishments

Fiscal Year	Accomplishments
FY 2019	<ul style="list-style-type: none"> • In FY 2020, CDC continued to offer two web-based courses outlining key principles, legal concepts, and best practices to prevent and respond to harassment at work. <ul style="list-style-type: none"> ○ Harassment Prevention: A Commonsense Approach for Employees ○ Harassment Prevention: A Commonsense Approach for Managers, which was mandatory for all managers and supervisors <ul style="list-style-type: none"> ▪ Over 1200 managers and supervisors completed the training • CDC also provided <i>Conflict Resolution</i>, <i>Civil Treatment</i>, and <i>Building Trust in the Workplace</i> training for managers, supervisors, and employees. Over 150 employees participated in person and virtually.

MD-715 – Part H

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.

If the agency did not address any deficiencies during the reporting period, please check the box.

Statement of Model EEO Program Essential Element Deficiency

Compliance Indicator	Brief Description of Program Deficiency
B.1.a; B.1.a.2, B.3.b.a.2	The EEO Director’s reporting structure is not aligned with EEOC recommendations.

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)
5/01/2019	Realign reporting structure for the EEO Director to meet requirements specified by the EEOC and the Elijah E. Cummings Federal Employee Antidiscrimination Act of 2020	9/30/2019	09/30/2021	

Responsible Official(s)

Title	Name	Performance Standards Address the Plan? (Yes or No)
Director, OEEO	Reginald R. Mebane	No

Report of Accomplishments

Target Date (mm/dd/yyyy)	Planned Activities	Sufficient Funding & Staffing? (Yes or No)	Modified Data (mm/dd/yyyy)	Completion Data (mm/dd/yyyy)
09/30/2019	EEO Director will continue to work with other CDC senior leadership to revise the new strategic framework and reconsider the current reporting structure for the EEO Director	Yes	12/31/2021	

Report of Accomplishments

Fiscal Year	Accomplishments	
2020		

MD-715 – Part H

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.

If the agency did not address any deficiencies during the reporting period, please check the box.

Statement of Model Program Essential Element Deficiency

Type of Program Deficiency	Brief Description of Program Deficiency
C.3.a	All managers and supervisors should have an element in their performance appraisal that evaluates their commitment to agency EEO policies and principles and their participation in the EEO program.
C.3.b.1	Rating officials should evaluate the performance of managers and supervisors based on resolving EEO problems/ disagreements/conflicts, including the participation in ADR proceedings.
C.3.b.2	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).
C.3.b.3	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.
C.3.b.4	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.
C.3.b.5	Rating officials should evaluate the performance of managers and supervisors based on providing religious accommodations when such accommodations do not cause an undue hardship.
C.3.b.6	Rating officials should evaluate the performance of managers and supervisors based on providing disability accommodations when such accommodations do not cause an undue hardship.
C.3.b.7	Rating officials should evaluate the performance of managers and supervisors based on supporting the EEO program in identifying and removing barriers to equal opportunity.
C.3.b.8	Rating officials should evaluate the performance of managers and supervisors based on supporting the anti-harassment program in investigating and correcting harassing conduct.
C.3.b.9	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.

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)
12/01/2019	Implement new performance standards for managers and supervisors	05/31/2021	05/31/2022	

Responsible Official(s)

Title	Name	Performance Standards Address the Plan? (Yes or No)
EEODI Director	Julie Murphy	

Planned Activities Toward Completion of Objective

Target Date (mm/dd/yyyy)	Planned Activities	Sufficient Funding & Staffing? (Yes or No)	Modified Date (mm/dd/yyyy)	Completion Date (mm/dd/yyyy)
05/31/2021	Draft new performance plan standards for inclusion in all supervisory performance plans	Yes		
6/30/2021	Brief ASA on new standards	Yes		
7/20/2021	Collaborate with OHR to include in new performance plan form	Yes		
09/20/2021	Update performance plan systems to incorporate new standards	Yes		
11/20/2021	Develop communications strategy to announce new standards (in coordination with OHR)	Yes		
11/30/2021	OHR to unveil new performance plan program including, new EEO/D&I related performance standards	Yes		

Report of Accomplishments

Fiscal Year	Accomplishments
2020	

MD-715 – Part H

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.

If the agency did not address any deficiencies during the reporting period, please check the box.

Statement of Model Program Essential Element Deficiency

Compliance Indicator	Brief Description of Program Deficiency
D.1.b; D.2.a; D.2.b; D.2.d	CDC does not have established procedures for implementing the four steps of barrier analysis

Table 7 - 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)
5/01/2019	Formalize procedures for ongoing trigger identification and barrier analysis	09/30/2020		10/05/202
06/01/2020	Establish and formalize mechanisms to regularly examine the impact of management/personnel policies, procedures, and practices by race, national origin, sex, and disability	12/31/2020	09/30/2021	
06/01/2020	Develop and document procedures for steps two through four of barrier analysis: 2) investigate and pinpoint barriers, 3) devise and implement tailored action plans, and 4) assess results.	09/30/2020	09/30/2021	

Table 8 - Responsible Official(s)

Title	Name	Performance Standards Address the Plan (Yes or No)
Director, OEE0	Reginald R. Mebane	Yes
Deputy Director, OEE0	Linnet Griffiths	Yes

Planned Activates Toward Completion of Objective 1

Target Date (mm/dd/yyyy)	Planned Activities	Sufficient Funding & Staffing? (Yes or No)	Modified Date (mm/dd/yyyy)	Completion Date (mm/dd/yyyy)
06/30/2019	Establish internal working group to review existing data sources and identify new sources for trigger identification	Yes		10/24/2019
09/30/2019	Identify gaps in data collection and reporting and recommend changes to address gaps; Identify opportunities and resources to collect and analyze required data for trigger identification	Yes	09/30/2020	10/05/2020
10/01/2020	Initiate trigger identification processes and procedures	Yes	10/21/2021	

Planned Activates Toward Completion of Objective 2

Target Date (mm/dd/yyyy)	Planned Activities	Sufficient Funding & Staffing? (Yes or No)	Modified Data (mm/dd/yyyy)	Completion Date (mm/dd/yyyy)
06/01/2020	Convene OEEO, HRO, and OMHHE for a series of meetings to pinpoint challenges to joint examination of policies, practices, and procedures by race, national origin, sex, and disability and impact on protected groups	Yes	07/31/2020	11/02/2020
01/31/2021	(New activity) Convene an internal working group to develop and document standard operating procedures for the remaining four steps of barrier analysis	Yes		03/24/2021
09/30/2021	(New activity) Develop barrier analysis standard operating procedures	Yes		
10/31/2021	(New activity) Implement comprehensive barrier analysis	Yes		

Table 9 - Report of Accomplishments

Fiscal year	Accomplishments
2020	<ul style="list-style-type: none"> CDC made significant progress toward strengthening procedures and processes to identify areas where barriers may operate to exclude certain groups and to eliminate those barriers. The agency convened a workgroup to establish a trigger identification process, which is the first step of barrier analysis. The group delivered a comprehensive set of recommendations that included over 75 sources of quantitative and qualitative data to be used to identify triggers for further investigation. These sources include all phases and benefits of employment (i.e., recruitment, hiring, promotions, professional development, employee recognition, separations) and incorporated data that had not been analyzed to identify potential barriers to equal employment opportunity in the past.

MD-715 – Part I-1

Agency EEO 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.

If the agency did not conduct barrier analysis during the reporting period, please check the box.

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	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

EEO Group
All Men
All Women
Hispanic or Latino Males
Hispanic or Latino Females
White Males
White Females
Black or African American Males
Black or African American Females
Asian Males
Asian Females
Native Hawaiian or Other Pacific Islander Males
Native Hawaiian or Other Pacific Islander Females
American Indian or Alaska Native Males
American Indian or Alaska Native Females
Two or More Races Males
Two or More Races Females

Sources of Data	Source Reviewed? (Yes or No)	Identify Information Collected
Workforce Data Tables	Yes	<p>CDC conducted an analysis of workforce data for permanent employees in workforce data tables A8 and A14. The agency also analyzed Applicant Flow Data (AFD).</p> <p>Workforce Data Both Hispanic males (1.30% vs. 5.17% CLF) and Hispanic females (1.95% vs. 4.79% CLF) were hired at rates lower than their benchmark rates.</p> <p>Hispanic males and females were voluntarily separated at lower rates than their participation in the workforce at the beginning of FY 2018 (1.07% vs. 1.28% PWF) and (1.25% vs. 1.83% PWF). There was one involuntary separation for Hispanic females (1.72%) during FY 2018.</p> <p>CDC’s permanent workforce shrunk at a greater rate (-1.77%) than Hispanic males (-0.82%) and Hispanic females (-0.57%), resulting in a slight increase in their participation rates (0.01%) and (0.03%) respectively.</p> <p>Applicant Flow Data When applying for MCOs, the percentage of Hispanics who self-identified exceeded their relevant Civilian Labor Force participation rate for all of the remaining mission critical series, with the exception of 2210 for Hispanic females (1.41% vs. 2.17% OCLF). In addition, there were no Hispanic women who self-identified for 0602 positions. The same held true for Hispanics who self-qualified.</p> <p>The pattern for referrals was slightly different. For Hispanic males, their percentages dropped below the OCLF benchmark for the 0401 series and no self-identified Hispanic males were referred for the 0602 series. For Hispanic females, their percentages dropped below the OCLF benchmark for the 0301, 0401, and 2210 series.</p> <p>No selections were made for 0602 positions. Hispanic males were only selected for 0601 positions (at a rate exceeding their OCLF benchmark) while Hispanic females were only selected for 0301, 0401 and 0601 positions (at rates exceeding their OCLF benchmarks).</p> <p>There was no AFD data for 0343 positions.</p>
Complaint Data (Trends)	No	
Grievance Data (Trends)	No	
Findings from Decisions (e.g., EEO, Grievance, MSPB, Anti-Harassment Processes)	No	
Climate Assessment Survey (e.g., FEVS)	No	

Exit Interview Data	No	
Focus Groups	No	
Interviews	No	
Reports (e.g., Congress, EEOC, MSPB, GAO, OPM)	Yes	During FY 2018, CDC used data from the annual EEOC report to the President to support initiation of the Hispanic Working Group and initiate Hispanic Barrier Analysis process.
Other (Please Describe)	Yes	In FY 2019, the Latino/Hispanic Health Work Group (LHHWG), an official scientific work group within CDC comprised of CDC staff whose work involves science, policy, or programs related to Latino/Hispanic health, conducted a voluntary and anonymous survey of its members to inform the work of the Hispanic Working Group. The survey was administered to collect information about 1) perceived discrimination experienced by the survey respondent, 2) perceived discrimination experienced by staff known to the survey respondent, 3) recommendations to maximize opportunities for persons of Hispanic/Latino/Spanish origin at CDC. Of the 129 LHHWG members who were Full time equivalents (FTEs) or Commissioned Corps officers on January 31, 2019, 80 members responded (62% response rate).

Status of Barrier Analysis Process

Barrier Analysis Process Completed? (Yes or No)	Barrier(s) Identified? (Yes or No)
Yes	Yes

Statement of Identified Barrier(s)

Description of Policy, Procedure, or Practice
<p style="text-align: center;">BARRIER ANALYSIS RESULTS</p> <ul style="list-style-type: none"> ▪ The results of the analysis indicate that there are institutional barriers to hiring Hispanics. <ul style="list-style-type: none"> – The Agency lacks a strategic and coordinated plan for hiring and promoting Hispanics. – There are limited funds for strategic recruitment and outreach, which further restricts targeted recruitment for Hispanics outside of the local commuting area. – There are limited entry level positions (GS-5 to GS-9) available and utilized. – The available hiring flexibilities are underutilized, and there is a lack of visibility and/or understanding of the potential use of career ladder positions to attract and retain candidates in mission critical occupational series. ▪ The analysis also indicates that there are attitudinal barriers to hiring Hispanics. <ul style="list-style-type: none"> – Some managers and supervisors have not received information about Executive Order 13171 instructing federal agencies to improve the representation of Hispanics in federal employment. – There is perceived cultural and language bias in the hiring and selection process, including selection for promotions, temporary details, and global assignment.

Objective(s) and Dates for EEO Plan

Objective	Date Initiated (mm/dd/yyyy)	Target Date (mm/dd/yyyy)	Sufficient Funding & Staffing? (Yes or No)	Modified Date (mm/dd/yyyy)	Date Completed (mm/dd/yyyy)
1. Convene Hispanic Working Group to conduct barrier analysis.	04/01/2017	07/30/2018	Yes		08/02/2018
2) Appoint a Collateral Hispanic Employment Program Manager until funding is approved for a permanent position.	04/01/2017	07/30/2018	No		08/20/2018
3. Finalize Hispanic/Latino Barrier Analysis Report	04/01/2017	09/30/2017	Yes	09/30/2018	08/31/2019
4. Inform CDC workforce of the outcome of the barrier analysis and recommendations.	8/28/2019	10/30/2019	Yes		10/04/2019
5. Finalize Action Plan based on barrier analysis results and HWG recommendations	8/28/2019	9/30/2020	Yes		10/06/2020
6. Assess results and revise action plan, as necessary (new objective)	03/01/2021	09/30/2022	Yes		

Responsible Official(s)

Title	Name	Performance Standards Address the Plan? (Yes or No)
1. HRO Director	Dia Taylor	No
2. EEO Director	Reginald Mebane	No

Planned Activities Toward Completion of Objective

Target Date (mm/dd/yyyy)	Planned Activities	Modified Date (mm/dd/yyyy)	Completion Date (mm/dd/yyyy)
08/30/2021	Hire new Affirmative Employment Manager (AEM) after the departure of the prior AEM in FY 2020 (new activity)		
6/30/2020	Disseminate action plan, timelines, and key performance indicators to agency stakeholders.	09/30/2021	
9/30/2020	Initiate implementation of the Action Plan agency wide.	01/01/2022	

Report of Accomplishments

Fiscal Year	Accomplishments
2020	<p>CDC experienced delays in implementing the action plan after the departure of the CDC Affirmative Employment Manager in early FY 2020 and redirection of resources across CDC in support of the response to COVID-19. While the agency did not fully implement the action plan in FY 2020, CDC succeeded in developing training to address perceived bias in hiring and selection processes that was identified through the barrier analysis. In April 2021, CDC launched <i>Workforce Awareness: Diversity and Inclusion, Unconscious Bias, and Microaggressions</i> training, which is mandatory for all managers and supervisors and optional for all other employees.</p> <p>CDC also coordinated and participated in a total of 66 recruitment and outreach events in FY 2020, many of which were conducted virtually due to extensive COVID-19 restrictions. Other events CDC planned to attend to engage with potential employees, such as the League of United Latin American Citizens (LULAC) 91st National Convention, were cancelled or suspended.</p> <p>CDC representatives from human resources, CDC’s volunteer recruiter cadre of staff from across the agency, and subject matter experts from several of CDC’s National Centers conducted recruitment activities in partnership with colleges and universities, conferences, and various job fairs. Eighteen events specifically targeted Hispanic or Minority Serving Institutions (MSI), resulting in contacts with over 815 individuals.</p> <p>A sample of events included:</p> <ul style="list-style-type: none"> • University of Puerto Rico at Rio Piedras Fall 2020 Job and Internship Fair • Hispanic Association of Colleges and Universities 33rd Annual Conference • Prospanica Conference & Career Expo • Society for Advancement of Chicanos/Hispanics and Native Americans in Science (SACNAS) STEM Conference <p>CDC also continued to participate in a collaboration between HHS headquarters and five operating divisions within the department to increase engagement with Hispanic and MSI by conducting a series of Pathways to Public Service recruitment seminars. This effort has standardized procedures and channels to attract students and recent graduates by educating them on the Pathways Programs (https://www.cdc.gov/jobs/pathways.html) and how to find and apply to federal jobs.</p> <p>Within CDC, a quarterly learning series was offered in FY 2020 to increase knowledge of hiring options available within the agency. The first session, “What You Need to Know: Hispanic Internship Program,” provided information about summer opportunities to Management Officers, Administrative Officers, Workforce Planning Specialists, and other hiring officials.</p>

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 plan will improve the recruitment, hiring, advancement, and retention of applicants and employees with disabilities. All agencies, regardless of size, must complete this Part of the MD-715 report.

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.

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

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

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

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 with the CDC Management Official Team (MOT), Schedule A-related trainings and briefings, and other services and support for Persons with Disabilities. CDC also provides a Diversity and Inclusion Scorecard for hiring managers, which provides a quarterly snapshot of agency performance related to hiring initiatives.

Section II: Model Disability Program

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

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

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

Yes X No

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

Disability Program Task	Number of FTE Staff – Full Time	Number of FTE Staff – Part Time,	Number of FTE Staff – Collateral Duty	Responsible Official (Name, Title, Office, Email)
Processing applications from PWD and PWTB	2 full time			Donna Jordan, Supervisory HR. Specialist, CDC/HRO, Special Emphasis Program, Client Services Office Thayes Carswell, CDC/HRO, Strategic Program Offices
Answering questions from the public about hiring authorities that take disability into account	2 full time			Donna Jordan, Supervisory HR. Specialist, CDC/HRO, Special Emphasis Program, Client Services Office Thayes Carswell, CDC/HRO, Strategic Program Offices Laura Taylor, Acting Disability Program Manager, CDC/OEEO
Processing reasonable accommodation requests from applicants and employees	5 full time			Anthony Stockton, EEO Manager, CDC/OEEO Laura Taylor, EEO Specialist, CDC/OEEO Michelle Williams, EEO Specialist CDC/OEEO Lucille Stevenson, EEO Specialist CDC/OEEO
Section 508 Compliance	1 full time			Mark Urban, CDC Section 508 Coordinator, CDC/OCOO
Architectural Barriers Act Compliance	1 full time			Laura Taylor, Acting Disability Program Manager, CDC/OEEO
Special Emphasis Program for PWD and PWTB	2 full time			Donna Jordan, Supervisory HR. Specialist, CDC/HRO, Special Emphasis Program, Client Services Office Laura Taylor, Acting Disability Program Manager, CDC/OEEO

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.

Yes X No

In FY 2020, the agency provided Disability Program staff with training to carry out their responsibilities, including training with the National Employment Law Institute (NELI). NELI conducted five Rehabilitation Act trainings to DP staff and over 200 CDC managers, supervisors, and employees to increase understanding of the statutory and legal authorities regarding reasonable accommodations, as well as recent legal developments.

B. PLAN TO ENSURE SUFFICIENT FUNDING FOR THE DISABILITY PROGRAM

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

Yes X No

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 APPLICANTS WITH DISABILITIES

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

In FY 2020, CDC coordinated and participated in a total of 66 recruitment and outreach events, many of which were conducted virtually due to extensive COVID-19 restrictions. Nine events targeted Persons with Disabilities, including veterans with disabilities, resulting in 1,750 contacts.

CDC promotes non-competitive hiring as a practice during Quarterly Enterprise Hiring Planning (EHP) meetings with hiring managers to discuss staffing plans and other HR-specific needs.

CDC uses the [USAJobs Agency Talent Portal](#) (ATP) to identify and review resumes of Schedule A and other candidates who could be hired non-competitively.

Individuals applying to vacancies through Schedule A are placed on a non-competitive referral list that is shared with hiring managers.

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 utilizes 5 CFR 213.3102(u) to hire persons under the Schedule A authority. In addition, the agency uses the special hiring authority to hire students under the Workforce Recruitment Plan (WRP), Persons with Disabilities Internship Program, and the federal Non-Paid Work Experience Program for disabled veterans. Hiring flexibilities are discussed during the pre-consultation phase of all hiring actions and during Quarterly EHP meetings with CIOs.

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 candidates who could be hired non-competitively. To determine eligibility for appointment, HR Specialists conduct thorough reviews of applicant resumes and supporting materials, 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, but 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.

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, HRO extends a tentative offer letter to the selectee.

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.

Yes X No N/A

Yes. Schedule A and other hiring flexibilities are reviewed with agency hiring managers during quarterly Enterprise Hiring Planning (EHP) meetings and during pre-consultations and consultations for all hiring actions.

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 establishes and maintains contacts with multiple organizations that assist PWD in securing and maintaining employment. In FY 2020, CDC participated in recruitment and outreach activities with AbilityLinks, Goodwill, Disabled American Veterans, Department of Labor, and other organizations, resulting in over 1750 contacts. CDC also worked in partnership with the Veteran's Administration to recruit individuals via the Non-Paid Veteran's Program, which is used to identify, train, and hire veterans with disabilities.

C. PROGRESSION TOWARDS GOALS (RECRUITMENT AND HIRING)

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)		
i. Cluster GS-1 to GS-10 (PWD)	Yes	No X
ii. Cluster GS-11 to SES (PWD)	Yes	No X
b. New Hires for Permanent Workforce (PWTD)		
i. Cluster GS-1 to GS-10 (PTWD)	Yes X	No
ii. Cluster GS-11 to SES (PTWD)	Yes	No X

The hiring rate for PWTD in the grade clusters GS-1 to GS-10 was 1.9%, which is below the target of 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.

a. New Hires for MCO (PWD)	Yes X	No
b. New Hires for MCO (PWTD)	Yes X	No

Based on a review of applicant flow data (AFD), triggers exist for the following mission-critical occupations:

PWD:

1320 – Chemistry (0.0%) 1.3% benchmark

PWTD:

0343 – Management and Program Analysis (0.0%) 5.3% benchmark

0403 – Microbiology (0.0%) 1.2% benchmark

0685 – Public Health Program Specialist (1.1%) 1.7% benchmark

1320 – Chemistry (0.0%) 1.3% benchmark

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.

a. Qualified Applicants for MCO (PWD)	Yes X	No
b. Qualified Applicants for MCO (PWTD)	Yes X	No

Based on a review of the AFD, triggers exist for the following mission-critical occupations:

PWD:

- 0403 – Microbiology (2.9%) 4.4% benchmark
- 0601 – General Health Science (7.1%) 8.0% benchmark
- 0602 – Medical Officer (0.0%) 11.8% benchmark
- 1530 – Statistician (4.9%) 7.6% benchmark

PWTD:

- 0403 – Microbiology (1.4%) 2.3% benchmark
- 0601 – General Health Science (1.5%) 3.3% benchmark
- 0602 – Medical Officer (0.0%) 8.8% benchmark
- 1530 – Statistician (3.0%) 4.5% benchmark
- 2210 – Information Technology Specialist (4.5%) 4.6% benchmark

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.

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

Based on a review of the AFD, triggers exist for the following mission-critical occupations:

PWD:

- 0401 – General Biological Science (4.2%) 9.3% benchmark
- 0403 – Microbiology (0.0%) 2.9% benchmark

PWTD:

- 0343 – Management and Program Analysis (0.0%) 4.0% benchmark
- 0403 – Microbiology (0.0%) 1.4% benchmark
- 0601 – General Health Science (0.6%) 1.5% benchmark
- 0685 – Public Health Program Specialist (2.7%) 3.3% benchmark
- 1530 – Statistician (0.0%) 3.0% benchmark
- 2210 – Information Technology Specialist (0.0%) 4.5% benchmark

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 offers employees a myriad of programs, tools, and resources to support professional growth and advancement. The cornerstone of the agency's efforts to support professional development of all employees, including PWD and PWTD, is the Individual Development Plan (IDP), which is required for all employees. Development of the IDP facilitates two-way communication between employees and supervisors about short and long-term goals for advancement. It also benefits employees and the agency by:

- a. Exposing employees at all levels to a broad range of professional development opportunities
- b. Preparing employees for new responsibilities and challenges
- c. Facilitating opportunity for learning, growth, and career development in ways that support the agency in achieving its mission
- d. Enhancing employee satisfaction
- e. Focusing training resources in the areas of greatest need

B. CAREER DEVELOPMENT OPPORTUNITIES

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

CDC has a number of career development programs for employees. CDC-University provides high-quality training programs and services, as well as mentoring and coaching programs for all employees such as:

- a. Instructor-led training delivery
- b. Online training
- c. Competency modeling and gap assessments
- d. Career map development, including individual development plans
- e. Mentoring – formal and informal
- f. Coaching

Employees may also participate in temporary details and other career development opportunities, such as the Long-Term Education Program, which allows federal employees to receive full-time training through non-government entities for up to two years.

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

Career Development Opportunities	Total Participants Applicants	Total Participants Selectees	PWD Applicants	PWD Selectees	PWTD Applicants	PWTD Selectees
Internship Programs	0	0	0	0	0	0
Fellowship Programs	0	0	0	0	0	0
Mentoring Programs	32	32	0.35%	0.35%	0	0
Coaching Programs	170	170	0.89%	0.89%	0.47%	0.47%
Training Programs	208	145	1.95%	1.06%	2.23%	1.40%
Detail Programs	0	0	0.00%	0.00%	0	0
Other Career Development Programs	12	12	0.18%	0.18%	0.47%	0.47%

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.

- | | | | |
|---------------------|-----|----|-------|
| a. Applicants (PWD) | Yes | No | N/A X |
| b. Selections (PWD) | Yes | No | N/A X |

Data is not available to complete a comprehensive assessment of participation by PWD. In addition, participation in all training and career development activities was lower than anticipation due to cancellations because of COVID-19 restrictions.

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

- | | | | |
|----------------------|-----|----|-------|
| a. Applicants (PWTD) | Yes | No | N/A X |
| b. Selections (PWTD) | Yes | No | N/A X |

Data is not available to complete a comprehensive assessment of participation by PWTD. In addition, participation in all training and career development activities was lower than anticipation due to cancellations because of COVID-19 restrictions.

C. AWARDS

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) | Yes X | No |
| b. Awards, Bonuses, & Incentives (PWTD) | Yes X | No |

PWD:

Cash Awards

\$2000-2999 (12.6%) 14.6% benchmark
\$3000-3999 (9.5%) 13.4% benchmark
\$4000-4999 (4.4%) 5.5% benchmark
\$5000+ (2.5%) 6.3% benchmark

Time Off Awards

31-40 Hours (8.3%) 8.6% benchmark

PWTD:

Cash Awards

\$1000-1999 (21.5%) 23.4% benchmark
\$2000-2999 (11.4%) 14.6% benchmark
\$3000-3999 (8.2%) 13.4% benchmark
\$4000-4999 (3.7%) 5.5% benchmark
\$5000+ (2.3%) 6.3% benchmark

Time Awards

31-40 Hours (7.8%) 8.6% benchmark

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) | Yes X | No |
| b. Pay Increases (PWTD) | Yes | No X |

Yes, 15.0% of PWDs received a QSI/Performance-Based Pay Increase (PBPI) which is below the 16.6% benchmark.

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) | Yes | No | N/A X |
| b. Other Types of Recognition (PWTD) | Yes | No | N/A X |

No data available.

D. PROMOTIONS

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) below:

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

PWD Internal Applicants:

- a. Promotions to GS-14 positions were as follows:
 - i. Among Qualified Internal Applicants for Promotions (6.0%) 6.8% benchmark
- b. Promotions to GS-15 positions were as follows:
 - i. Among Qualified Internal Applicants for Promotions (4.7%) 5.3% benchmark
- c. Promotions to SES positions were as follows:
 - i. Among Internal Selections for Promotions (8.3%) 9.7% benchmark

Does your agency have a trigger involving PWTD among the qualified *internal* applicants and/or selectees for **promotions** to the senior grade levels? (The appropriate benchmarks are the relevant applicant pool for qualified internal applicants and the qualified applicant pool for selectees.) For non-GS pay plans, please use the approximate senior grade levels. If “yes”, describe the trigger(s) in the text box.

a.	SES		
	i. Qualified Internal Applicants (PWTD)	Yes	No X
	ii. Internal Selections (PWTD)	Yes X	No
b.	Grade GS-15		
	i. Qualified Internal Applicants (PWTD)	Yes	No X
	ii. Internal Selections (PWTD)	Yes X	No
c.	Grade GS-14		
	i. Qualified Internal Applicants (PWTD)	Yes X	No
	ii. Internal Selections (PWTD)	Yes X	No
d.	Grade GS-13		
	i. Qualified Internal Applicants (PWTD)	Yes X	No
	ii. Internal Selections (PWTD)	Yes	No X

PWTD Internal Applicants:

- a. Promotions to the GS-13 positions were as follows:
 - ii. Among Qualified Internal Applicants for Promotions (3.2%) 3.6% benchmark
- b. Promotions to GS-14 positions were as follows:
 - iii. Among Qualified Internal Applicants for Promotions (2.2%) 3.1% benchmark
 - iv. Among Internal Selections for Promotions (1.2%) 2.2% benchmark
- c. Promotions to GS-15 positions were as follows:
 - i. Among Internal Selections for Promotions (0.0%) 2.9% benchmark
- d. Promotions to SES positions were as follows:
 - ii. Among Internal Selections for Promotions (0.0%) 3.2% benchmark

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.

a.	New Hires to SES	(PWD)	Yes X	No
b.	New Hires to GS-15	(PWD)	Yes	No X
c.	New Hires to GS-14	(PWD)	Yes	No X
d.	New Hires to GS-13	(PWD)	Yes	No X

New Hires to SES: 0.0% with a 2.0% benchmark.

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.

a.	New Hires to SES (PWTD)		Yes X	No
b.	New Hires to GS-15	(PWTD)	Yes	No X
c.	New Hires to GS-14	(PWTD)	Yes X	No
d.	New Hires to GS-13	(PWTD)	Yes	No X

New Hires to GS-14: 0.0% with a 1.9% benchmark

New Hires to SES: 0.0% with a 0.3% benchmark

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.

a. Executives			
i. Qualified Internal Applicants (PWD)	Yes	No X	
ii. Internal Selections (PWD)	Yes X	No	
b. Managers			
iii. Qualified Internal Applicants (PWD)	Yes	No	N/A X
iv. Internal Selections (PWD)	Yes	No	N/A X
c. Supervisors			
i. Qualified Internal Applicants (PWD)	Yes X	No	
ii. Internal Selections (PWD)	Yes	No X	

Triggers Among Qualified Internal Applicants for Promotions to Supervisory Positions

Supervisor: 5.7% with a 6.5% benchmark

Triggers Among Internal Selections for Promotions to Supervisory Positions

Executive: 8.3% with a 9.7% benchmark

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.

a. Executives			
i. Qualified Internal Applicants (PWTD)	Yes	No X	
ii. Internal Selections (PWTD)	Yes X	No	
b. Managers			
i. Qualified Internal Applicants (PWTD)	Yes	No	N/A X
ii. Internal Selections (PWTD)	Yes	No	N/A X
c. Supervisors			
i. Qualified Internal Applicants (PWTD)	Yes X	No	
ii. Internal Selections (PWTD)	Yes X	No	

Triggers Among Qualified Internal Applicants for Promotions to Supervisory Positions

Supervisor: 2.7% with a 3.1% benchmark

Triggers Among Internal Selections for Promotions to Supervisory Positions (PWTD)

Supervisor: 0.0% with a 2.7% benchmark

Executive: 0.0% with a 3.2% benchmark

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.

- | | | | |
|------------------------------------|-------|------|-------|
| a. New Hires for Executives (PWD) | Yes X | No | |
| b. New Hires for Managers (PWD) | Yes | No | N/A X |
| c. New Hires for Supervisors (PWD) | Yes | No X | |
| d. | | | |

Triggers Among New Hires to Supervisory Positions with Qualified Applicants

Executive: 0.0% with a 2.0% benchmark

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) below:

- | | | | |
|-------------------------------------|-------|------|-------|
| a. New Hires for Executives (PWTD) | Yes X | No | |
| b. New Hires for Managers (PWTD) | Yes | No | N/A X |
| c. New Hires for Supervisors (PWTD) | Yes | No X | |

Triggers Among New Hires to Supervisory Positions with Qualified Applicants

Executive: 0.0% with a 0.3% benchmark

Section V: Plan to Improve Retention of Persons with Disabilities

To be a 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 personal assistance services.

A. VOLUNTARY AND INVOLUNTARY SEPARATIONS

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

Yes No X N/A

Over 75% of eligible Schedule A employees that successfully completed the two-year trial were converted to a career-conditional appointment. Other eligible Schedule A employees were converted to another Schedule A appointment.

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) | Yes | No X |
| b. Involuntary Separations (PWD) | Yes | No X |

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

- | | | |
|-----------------------------------|-----|------|
| a. Voluntary Separations (PWTB) | Yes | No X |
| b. Involuntary Separations (PWTB) | Yes | No X |

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

B. ACCESSIBILITY OF TECHNOLOGY AND FACILITIES

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

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

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

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/eo/eoguidance/policy.htm#barriers>

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.

Various CDC stakeholders, including Disability Program staff; the Office of Safety, Security, and Asset Management; the Office of the Chief Information Officer; the Reasonable Accommodation Team; the Disability Interest Group (employee resource group); and agency leaders, 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.

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 326 initial requests for reasonable accommodations in FY 2020, with 97% closed within 60 days of receiving qualifying information.

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.

FY 2020 Reasonable Accommodations Accomplishments/New Initiatives Report

The top three accommodations provided were related to:

- a. Modified work schedules
- b. Sign language interpreting services
- c. Other than coach class travel

Accomplishments:

- a. Conducted a reasonable accommodation risk assessment for the OCOO Strategic Business Initiatives Unit and developed a supervisory checklist, training aids, and other tools to help OCOO supervisors respond to reasonable accommodation requests.
- b. Documented CDC Reassignment as a Reasonable Accommodation procedures to clarify the reassignment process, define the roles and responsibilities of all parties, and provide detailed guidance for CIOs and partners.
- c. Collaborated with the Office of Safety, Security, and Asset Management on the use of Comfort and Service Animals on CDC campuses.
- d. Partnered with the National Employment Law Institute to provide five Rehabilitation Act trainings to over 200 CDC managers, supervisors, and employees to increase understanding of the statutory and legal authorities regarding reasonable accommodations, as well as recent legal developments.

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

Pursuant to 29 C.F.R. § 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 no requests for PAS in FY 2020.

Section VI: EEO Complaint and Findings Data

A. EEO COMPLAINT DATA INVOLVING HARASSMENT

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?

Yes No X N/A

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

Yes X No N/A

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.

Not applicable as there were no findings of discrimination.

B. EEO COMPLAINT DATA INVOLVING REASONABLE ACCOMMODATION

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?

Yes No X N/A

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

Yes X No 0 N/A 0

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.

Not applicable as there were no findings of discrimination.

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

Yes No X N/A

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

Yes No N/A X

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, accomplishment(s).

Current Identified Trigger(s)

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

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

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