

**NIH Workforce Transition Policy**  
**NIH Steering Committee and Management and Budget Workgroup**  
**Decisions for Affected Employee (Post-DEAS)**

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**Purpose and Scope**

This establishes policy applicable to the transition of employees affected by competitive sourcing and restructuring initiatives. The NIH Steering Committee has approved the policies and the Management and Budget Working Group has approved implementing actions.

**Summary of Key Decisions**

**Immediate Reassignment of Affected Employees:** Unless circumstances dictate otherwise, affected employees will be immediately reassigned to new permanent positions throughout the NIH. Under this approach:

- Employees will be immediately reassigned to ICs/OD where they will be employed and housed.
- The ICs/OD will be responsible for developing a permanent position for employees assigned to them.
- Training to develop skills necessary for the target position and other employee services will be available to employees through the NIH Transition Center
- The OD, in addition to managing the NIH Transition Center, will provide guidance and assistance such as the development of generic job descriptions, minimum training requirements, etc. to assure a corporate-wide approach to managing the transition.

**Allocation of Placements:** The assignment of employees will be proportional across the ICs/OD to the degree possible. If the assignment of employees is less than proportional, a reallocation of FTEs from all ICs to the receiving ICs may be necessary to avoid inequities.

**Costs:** Training costs for needs assessment, career counseling, re-training, and outplacement support for transition employees will be covered through central services funds.

**Implementation of Key Decisions**

In order to implement the NIH Steering Committee decisions on placing employees displaced by restructuring and competitive sourcing initiatives, the following policies and procedures have been implemented, as approved by the NIH Management and Budget Working Group.

**Allocation Formula:** The number of placements that may be assigned to each IC is based on two premises – that this is a corporate issue and each IC should participate at least at some minimum level and that, with this consideration, the distribution should be proportional to FTEs. To avoid the necessity of making allocations with each restructuring, an allocation pool of 100 is established. Within the overall pool, each IC/OD is first assigned an allocation of one in order to fulfill the minimum requirement. The remaining pool is then spread proportionately to the ICs/OD according to their share of NIH's FY 2005 FTE distribution. Should 100 placements be made, a new allocation will be calculated using the same principles and the FTE ceilings existing at that time.<sup>1</sup>

**Placement Plan:** A formal voluntary placement program will be established to facilitate voluntary placements and to minimize, to the degree possible, the number of directed reassignments. During a pre-established period of time after the restructured organization has been staffed, but prior to the time that the new organization is officially operational, impacted employees will be provided the opportunity to express an interest, and receive consideration, for positions established by any of the ICs/OD for which they qualify. Employees who have not received placement into the restructured organization or another job opportunity during the voluntary placement program will be matched by employee last name to an IC/OD, with remaining allocations, by FTE ceiling into a position through directed reassignment.

**Credits for Placements** – An IC/OD will receive credit against their allocation for voluntary placements of affected employees made during the voluntary placement program described above and for any placement occurring through directed reassignment.

When an IC/OD has met its allocation requirement it is no longer required to place impacted employees though it would benefit the corporate NIH and the remaining affected employees if the IC/OD offices continued to consider affected employees for additional vacancies.

**Duties:** Affected employees will continue to be employed by their IC of record until placed into a new permanent position. The ICs will be responsible for assignment of work duties, oversight, and supervision of these employees until placed.

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<sup>1</sup> A total of 30 voluntary and directed reassignments were made for affected employees of the DEAS MEO, so that 30 individuals have been placed against this initial allocation of 100 to date. During this initial process, not all ICs received placements. During the next directed reassignment, placements will be made so that all ICs will have received at least one placement before additional directed reassignments are made to ICs who have already received placements.

**Physical Location of Affected Employees:** Employees will continue to reside in their IC of record until placed into a new permanent position.

**Transition Period:** Employees that are placed outside of the restructured organization through directed reassignment will receive a formal transition period that will commence upon placement into a permanent position. In voluntary placement situations the decision to initiate a formal transition period will be discretionary to the leadership of the IC. The formal transition period will allow the individual to receive training and development that is directly related to the position to which they are assigned.

An assessment of service and training levels required to develop skills necessary for the employees new permanent position will be prepared by the NIH Transition Center and employee. The types of services and training requirements will be detailed in an Individual Transition Plan (ITP), and presented to the supervisor of record for review and approval.

Duration of services during this period will be less than or equal to 12 months. The actual length will also be determined by the assessment and defined in the ITP that is presented to the supervisor of record for review and approval.

**Transition Services:** Two transition service centers have been established, on campus and in Executive Plaza South (EPS). The purpose is to serve as a central service facility used for the delivery of services and also provides workspace for a potentially large and fluctuating population of affected staff to use on a limited basis for resume writing and USAJOBS application submission for NIH positions, career counseling, etc.

The NIH Transition Center provides services that are specifically designed to facilitate the reassignment and retraining of employees affected by restructuring initiatives. The Center's Career Specialists are also available to provide individual and/or group employee and management support, as well as resources and tools.

In addition, all employees impacted by restructuring initiatives are eligible for basic services provided by the NIH Transition Center. Such services include career transition and retirement seminars, resume development, interview preparation, USAJOBS or other identified application mechanisms and individualized appointments with Career Specialists.

**Costs:** Salaries will continue to be the responsibility of the employees IC of record. Services provided by the NIH Transition Center will be funded through the NIH Central Services budget.