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NIH Ombudsman

NIH OFFICE OF THE OMBUDSMAN

Center for Cooperative
Resolution

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ANNUAL REPORT 2000



**NIH Office of the
Ombudsman**
The Center for
Cooperative Resolution



INTRODUCTION

This is the second Annual Report of the NIH, Office of the Ombudsman, Center for Cooperative Resolution (CCR). The purpose of the report is to give members of the NIH community an overview of the scope of our activities and accomplishments during the 2000 calendar year.

The Office of the Ombudsman, Center for Cooperative Resolution (CCR) develops, coordinates and provides a full range of dispute resolution programs and services for all employees of the National Institutes of Health (NIH). CCR staff address individual as well as multiparty, group and organizational conflicts and concerns. While the Ombudsman is not empowered to make any decisions or impose any particular actions, we do have the authority to:

- assist managers and employees, or even whole units or staffs, by facilitating the resolution of disputes in the workplace;
- make recommendations for a change in policy or practice where a particular dispute or set of issues reflects a larger systemic problem fostering conflict in the workplace; and
- raise issues with those persons in the management structure who possess the authority to address concerns (e.g., EEO and Personnel Officers, Scientific Directors, Executive Officers).

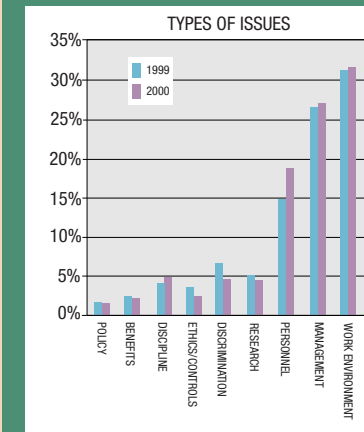
In addition, the Ombudsman, provides overall leadership and serves as the primary resource for information relating to conflict management and alternative dispute resolution (ADR) at NIH. More information is available in our brochure and at our website, <http://www4.od.nih.gov/ccr>.

PROGRAM PROFILE

In 2000, the Office of the Ombudsman handled a total of 347 cases, a 7.5% increase over 1999, the first year of operation. Over 800 people met with the Ombudsman staff this year. Many of the cases brought to the Office involved multiple issues, as well as multiple complainants (persons who bring issues to the office) and respondents (persons with whom the complainant has an issue or someone in the management structure who helps facilitate a resolution). There was nearly a 50% increase in the number of multiparty and group interventions.

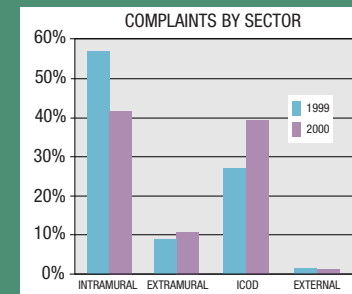
This figure shows the distribution among issues raised by those who visited the CCR in Year 1999 and Year 2000. There is no statistically significant change in the data from year to year, and the categories reflect how we group cases after we have intervened rather than by the initial complaint.

WHAT DO WE HEAR? ISSUES



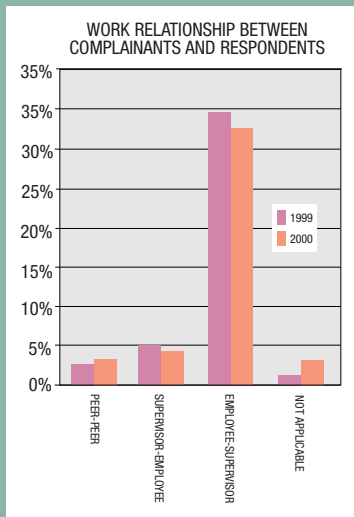
WHO COMES TO US? OFFICE USAGE

The figure below illustrates employees who contacted the Ombuds office. They are grouped according to their membership in the three main business functions of the NIH – Intramural, Extramural and IC Administration. The External category designates those whose work does not directly fall in these categories (e.g., other Federal Agencies, universities or private industry who collaborate on NIH projects).



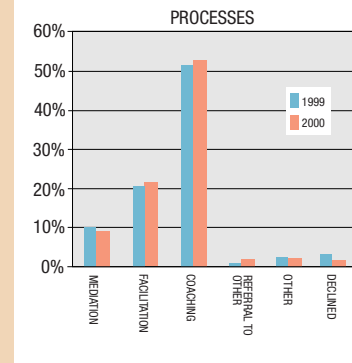
COMPLAINANT/RESPONDENT RELATIONSHIPS

This figure illustrates the relationship between the parties in terms of who first raised the issue, either with the Office of the Ombudsman or to upper level management, who subsequently referred the matter to this office. The category "Not Applicable" includes some group interventions and some situations not readily captured by the above categories.

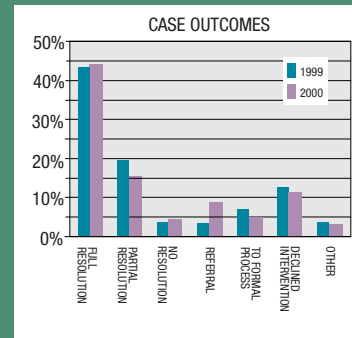


HOW DO WE HELP? PROCESSES

This figure presents a comparison of the processes used by the Ombudsman for both Year 1999 and 2000. It is common for multiple processes to be used in the resolution of a single case. We first attempt to help people solve problems on their own. For example, an employee (complainant) might first meet with an Ombudsman to discuss an issue and options for handling the matter directly. The complainant and ombudsman may agree that the situation might be handled more strategically by the ombudsman facilitating a resolution through shuttle diplomacy. Alternatively, the Ombudsman may recommend that a mediation process be initiated. Often, referrals to other resources for more specialized assistance are offered as well.



WHAT ARE THE RESULTS? OUTCOMES



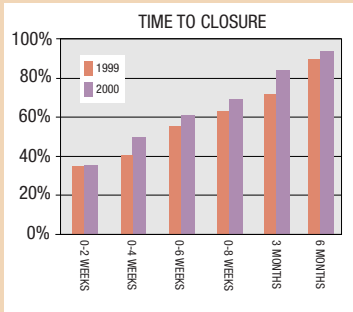
The figure above highlights the percentage of fully resolved cases for the year. These figures indicate a high resolution rate when one considers that 12% declined intervention and 16% were referred to formal processes or other resources such as the Employee Assistance Program, the Equal Opportunity Employment Offices, and the Work and Family Life Center.

The resolution rates do not adequately capture the success of the Office, given the fact that the Office works frequently with complex, multiparty scientific disputes. In the data collection, multiparty cases count as single cases in the same way that a single complainant does. The statistics do not reflect the complexity of issues resulting in implementation and monitoring of multiple, long-term strategies.



CASE

DURATION



This figure represents the time to closure of cases brought to the Office. One of the primary reasons for establishing the Office of the Ombudsman was to allow for the prompt resolution of disputes. When issues are addressed quickly in the workplace, everyone can focus on the mission of the organization and morale is better maintained. It is thus significant that nearly 40% of our cases were closed within two weeks, 50% within one month, and 85% within three months.

The charts above illustrate that in the past year a wide array of people and groups have availed themselves of the services of the Ombudsman to address a variety of issues. In addition, this office has continued to handle complex, multi-party scientific disputes. Of the 347 cases handled, 30 were organizational, involving either the entire lab, an IC or NIH-wide matter, working with councils, committees, or executive groups.

The Intramural, Extramural and IC Administration sectors of NIH have requested our assistance in proportion to their representation of the whole of NIH, and manager referrals to this office have exceeded those to similar programs in other agencies. We have fully or partially resolved 63% of our cases, using a variety of approaches or processes, including assisting people in solving problems on their own. Finally, recognizing the potential negative impact of lingering conflicts, we have assisted parties in resolving disputes quickly.

The Ombudsman uses the data reported above to inform our practice in several ways. First, the data assists us in handling disputes and in assessing where we need to focus outreach efforts. Second, data collection enables us to identify and assess organizational developments and trends, and to reflect those to senior management in the form of systemic feedback. Third, the data collection informs our development of new (and continuing) conflict management initiatives.

UPDATE ON CONFLICT MANAGEMENT INITIATIVES

1 As an outgrowth of executive level discussions regarding the prevalence of racial and other disparities, a committee of executive level parties was formed to study these issues more closely and develop recommendations for the Deputy Director, NIH. Dr. Howard Gadlin, CCR Director, chairs this committee.

2 The Peer Resolution Panel pilot developed in 1999 and scheduled for roll-out in 2000, has been implemented and heard its first cases. Peer panels, long used in the context of scientific authorship and intellectual property issues, have now been incorporated into the existing personnel grievance system to improve the credibility and effectiveness of that process among employees and managers. Composed of employees and managers, the panels decide grievances filed by employees against certain management actions by determining whether the Agency properly and consistently applied

Agency policy in the given circumstances. It is expected that cases will be resolved at an earlier point in the grievance process as employees discover the utility and effectiveness of the Peer Resolution Panel.

3 The CCR is the NIH ADR provider for the new EEO 1614 regulations, which require agencies to offer ADR as a step in the informal EEO process. The CCR collaborated with the OEO in developing a process to coordinate and refer EEO contacts to the CCR as an option in resolving EEO complaints.

4 The CCR program for partnering among scientists is well underway. This program was initiated last year when the Ombudsmen noted that many of the conflicts between scientists could have been avoided had the parties begun their collaboration, or postdoc-mentoring relationships, with an explicit agreement about their expectations of each other and about how they would handle the major transactions of the collaboration. We have developed a template

for partnering agreements that may be used to spell out carefully what the parties expect from each other – agreement about authorship and crediting for the collaboration and a mechanism for addressing conflicts should they arise in the future. These model agreements are being crafted with members of the scientific community and will be finalized in 2001.

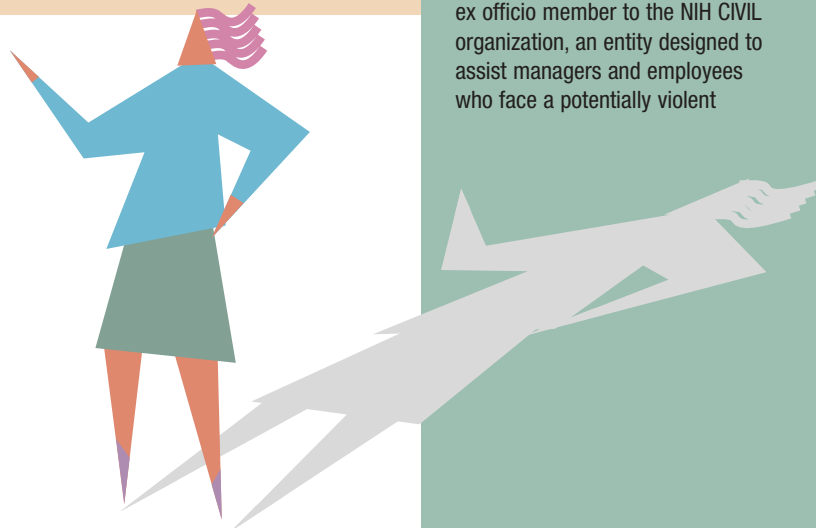


INDEPENDENT

The Office of the Ombudsman is not part of any Institute or Center management structure, and thus remains free from interference or influence to surface, address, and resolve issues throughout the organization.

INFORMAL

The Ombudsman provides an informal option for thinking through issues without being “on the record.” We provide an alternative to formal grievance and complaint processes, and are flexible enough to handle any workplace dispute.



The CCR Executive Seminar Series was developed and presented to Institute Directors, Scientific Directors and senior executives on a variety of conflict resolution topics. Nationally known experts were invited to present ideas for discussion on the various facets of conflict resolution that face top level managers. Seminar themes included the following:

- *Handling Emotional Dimensions of Workplace Conflict* by Tricia S. Jones, Temple University
- *Communicating Across Cultures* by John Barkat, Ombudsman, Pace University
- *Handling Workplace Conflict: Lessons Learned for Managers* by Ella Wheaton, Ombudsman, Department of Justice
- *Consensus Building: Forging Agreement Amidst Chaos* by Lawrence Susskind, Ford Professor of Urban and Environmental Planning at MIT, President of the Consensus Building Institute
- *Dealing with Difficult People* by Howard Gadlin, Ombudsman, NIH

A CCR ombudsman provides consultation and serves as an ex officio member to the NIH CIVIL organization, an entity designed to assist managers and employees who face a potentially violent

situation in the workplace. The Ombudsman also serves on the CIVIL Response Team, which is convened to triage these situations and recommend courses of action when these situations arise.

The CCR continues its collaborative relationship with the Institute for Conflict Analysis and Resolution at George Mason University. Advanced graduate students are placed in the CCR for their practicum work.

The CCR was the recipient of the OPM Outstanding ADR program for the year 2000 for its innovative ombudsman program in the federal sector.

NEUTRAL

The Ombudsman advocates for a fair process that reflects the needs and interests of all parties and assists them in identifying options for resolution. The Ombudsman does not advocate any particular outcome or side with any party.

CONFIDENTIAL

Our staff neither shares information nor takes an action without the specific permission of the party. Threats of serious imminent harm comprise the only exception to this standard of confidentiality. We do not keep information that identifies individuals, but we do retain statistics that enable us to identify trends and matters deserving of communication, such as are contained in this report.

EDUCATIONAL AND OUTREACH ACTIVITIES

The CCR Ombudsman staff give presentations to different groups within NIH such as: IC Directors, Scientific Directors, Scientific Ethics Committee, Executive and Personnel Officers and EEO administrators.

Other presentations include those within specific Institutes or Centers, such as planning retreats for principal investigators, and other clinical workgroups.

Nationally, the Director, CCR, gives regular presentations at ADR conferences, other federal agencies and universities. The Director is the current chair of the Coalition of Federal Ombudsmen and is a past president of The Ombudsman Association. He is an active participant in the joint work of two American Bar Association committees (the Dispute Resolution and Administrative Law Sections),

charged with developing a report and recommendations on the standards of practice for ombudsmen nationwide. He also serves as a member of the Federal Interagency ADR Working Group, which provides guidance regarding government-wide implementation of ADR.

Staff ombudsmen routinely attend monthly EEO, Employee Relations, Employee Assistance Program, and Quality of Worklife meetings to share information on CCR activities and to stay current in the activities of these groups, as well as to partner in joint educational outreach to the NIH community.

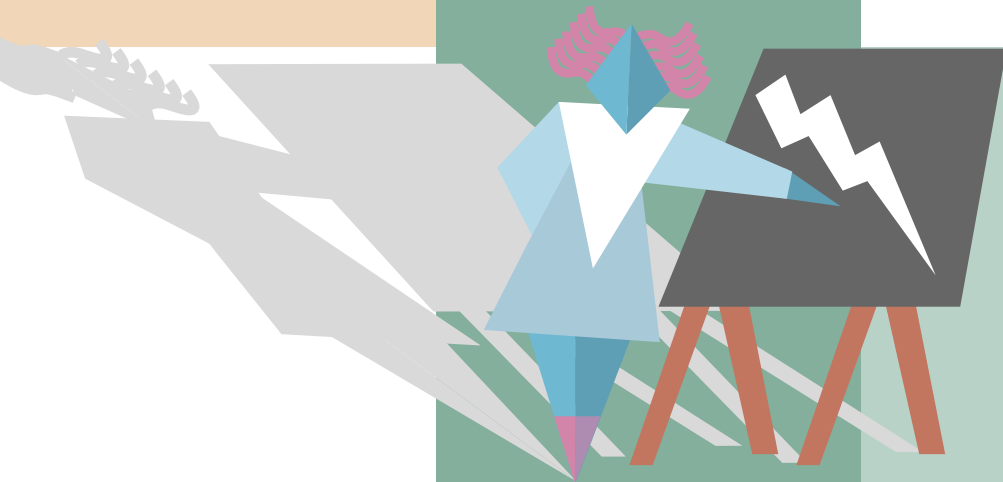
CASE SCENARIO

Employee I. Goalong was referred to the Office of the Ombudsman by his IC EEO office after electing the ADR option. He explained that his unit had undergone a reorganization several months ago, that he had been given assignments that were more technical in nature, and that his supervisor, I. N. Sist, had recently informed him that she felt his job performance was unacceptable, even possibly one or two levels below his current grade. The supervisor informed the employee that she was considering placing him on a performance improvement plan (PIP), as is required before an employee can be down-graded. The employee was very surprised and upset by this development. The employee was concerned that suddenly he was expected to return to performing the technical functions of his position, which he had not done in close to four years. He noted that his performance appraisals for the past three years had been "acceptable," and felt that because the supervisor had joined the office only six months before, she did not understand how his job had evolved nor could she have an adequate appreciation of his abilities. The employee felt that he possibly was being discriminated against on the basis of age. He noted an instance in which the supervisor, referring to the branch reorganization, said that changes were coming and that the branch needed employees with "young minds" who could keep up with swiftly moving developments in the field. The employee told the ombudsman he wanted a reassignment.

After discussing the issues with an ombudsman, the employee asked the supervisor if she would be willing to meet with the ombudsman to see if they could resolve their issues in a non-adversarial way. The supervisor agreed, and the ombudsman met with her to hear her perspective and to see if there was some way he could be of assistance to both parties.

It became evident as the ombudsman and the supervisor spoke that she felt that the employee might not be up to the changes coming and worried that he had not kept current with advances in his specialty. Further, it became apparent to them both that the supervisor had not realized the extent to which the employee had been directed over the past four years away from the technical aspects of his position. Since the Supervisor I. N. Sist was new to her position and was not as familiar with the employee's performance and expertise as the second line Supervisor, D.J. Watch, the ombudsman asked Supervisor Sist if she was seeking guidance from Supervisor Watch on personnel decisions regarding the employee's performance. The supervisor indicated that she and Supervisor Watch were jointly involved in the assessment of the employee's performance and together were considering whether to place the employee on a PIP. The ombudsman received permission from the employee and Supervisor Sist to speak with Supervisor Watch.

The ombudsman explored management's ideas for the employee's



duties and responsibilities before and after the reorganization. Supervisor Watch indicated the employee should be held accountable for continuing to develop the technical skills and knowledge specified in his out-dated position description. Supervisor Watch also expressed his concern that, while prior to the recent reorganization the employee was performing useful administrative work, he did not feel that the level and complexity of that work was at the employee's proper grade level.

Having obtained the employee's permission, the ombudsman shared with both supervisors the employee's feeling that management bore some degree of responsibility for his current difficulty because the employee's work assignments over the past four years only rarely required him to use his technical skills. The supervisors acknowledged, in fact, that they had increasingly come to depend on the employee to handle a variety of administrative tasks. They began to explore with the ombudsman how management and the employee may have neglected

to ensure that the employee's technical expertise would remain current. The supervisors indicated a willingness to assist the employee with rebuilding his skills through several months of on-the-job re-training and close mentoring if he would commit to this and if he understood that this was the niche the branch needed and expected him to fill.

When the ombudsman met with the employee to convey management's offer, the employee felt that the offer was a thinly-veiled attempt to set him up to fail. The employee proposed that management reassign or detail him to another position that was consistent with his actual job experience over the past four years and would enable him to move away from the more technical aspects of his position.

The ombudsman explained to the employee that management is not obligated to honor an employee's request for a voluntary reassignment or detail and that generally the burden for locating such an opportunity

rests with the employee. Management indicated that it could not at present identify a place to reassign the employee, but might be willing to consider a detail if the employee could find one. Under such an arrangement, if the employee could identify an opportunity, his current branch would continue to pay his salary for an agreed upon amount of time, with the understanding that he would try to get hired as a permanent staff member at the new job location.

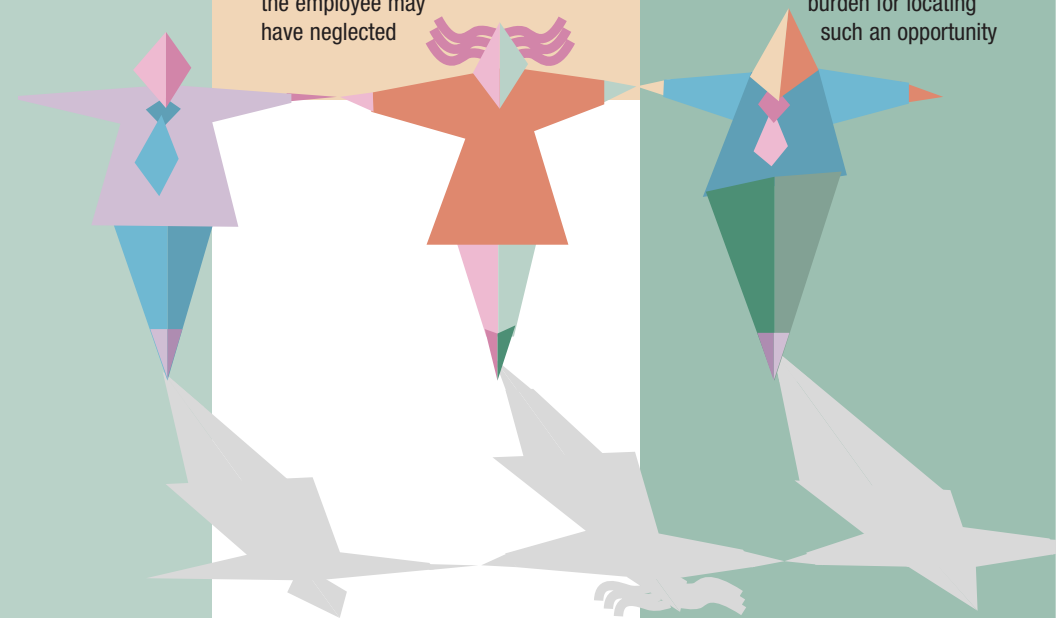
The ombudsman discussed with the employee his future employment status, including the possibility of a PIP and what might transpire should he not meet the criteria established therein. The ombudsman assisted the employee in weighing options. The employee eventually located, and management supported, a detail to another office. The employee subsequently was made a permanent employee in the unit to which he had been detailed.

CASE SCENARIO

A Lab Chief contacted the ombudsman for assistance in managing a dispute between two of his new postdoctoral fellows, one of whom was a bio-tech engineer, and the other, a highly respected clinician. Both had been recruited to the lab to provide expertise in a specialized area of brain imaging and complementary surgical procedures, and were expected to collaborate on a variety of research and clinical applications.

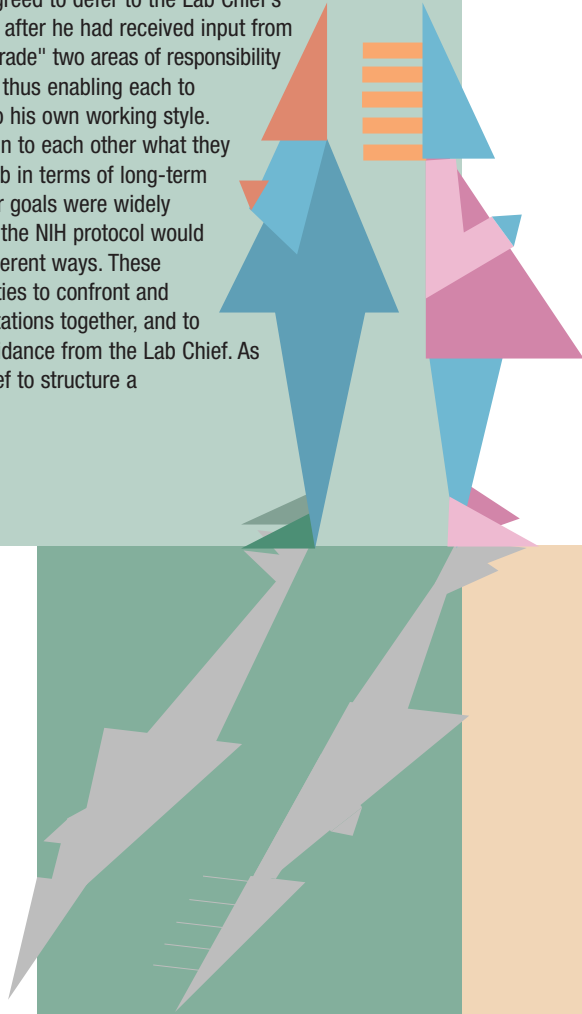
Having not gotten along for some time, the two had essentially ceased communicating with one another. The Lab Chief admitted he had tried to "stay out of it," hoping the two would eventually work out their differences to advance the collaboration. The situation, however, had continued to deteriorate to the point that other fellows in the lab had complained that this conflict was creating general morale problems. The Lab Chief subsequently confronted the two fellows and, discovering that little work had been accomplished in developing the protocol, expressed his strong disappointment as well as his desire that they work with this office to resolve their dispute in order to advance their scientific work.

In separate meetings with each party, the ombudsman discovered that the scientists shared some common views of the issues, including their sense that there was not a clear process for communicating with the Lab Chief. They also indicated that their roles were not clearly defined and that the goals for the project were not specified. The fellows had been left on their own to develop a protocol and working process for the exchange of scientific information. The ombudsman also recognized some



differences between the two scientists that might account for their difficulties, including the fact that their dramatically different working styles had likely contributed to their mutual misunderstanding. In addition, they each had distinct personal goals and hopes of how their experience in the lab would further their careers, and held radically divergent views of the value, financial and political, of their respective professional positions.

The ombudsman followed the private meetings with a joint meeting in which she highlighted areas of common concern, including the lack of clarity in roles, and suggested how their differing personal working styles might be negatively impacting their productivity. The scientists identified steps that would assist them both, such as specifying shared goals in developing the protocols, creating a mechanism for regular exchange of scientific information, and asking the Lab Chief to help them more clearly define their roles. They also successfully addressed the potentially divisive issue of authorship, which they had each previously avoided in the secret hope of negotiating individually with the Lab Chief. They agreed to defer to the Lab Chief's authority on who would be first author, after he had received input from each of them. Further, they agreed to "trade" two areas of responsibility in which they were currently engaged, thus enabling each to assume tasks that were more suited to his own working style. They also had the opportunity to explain to each other what they hoped to take from their work in the lab in terms of long-term career plans. Even though these career goals were widely divergent, they agreed that success in the NIH protocol would provide mutual benefit, although in different ways. These facilitated discussions allowed the parties to confront and work through their mutual misinterpretations together, and to realize that they needed clarity and guidance from the Lab Chief. As a result, they worked with the Lab Chief to structure a productive scientific collaboration.



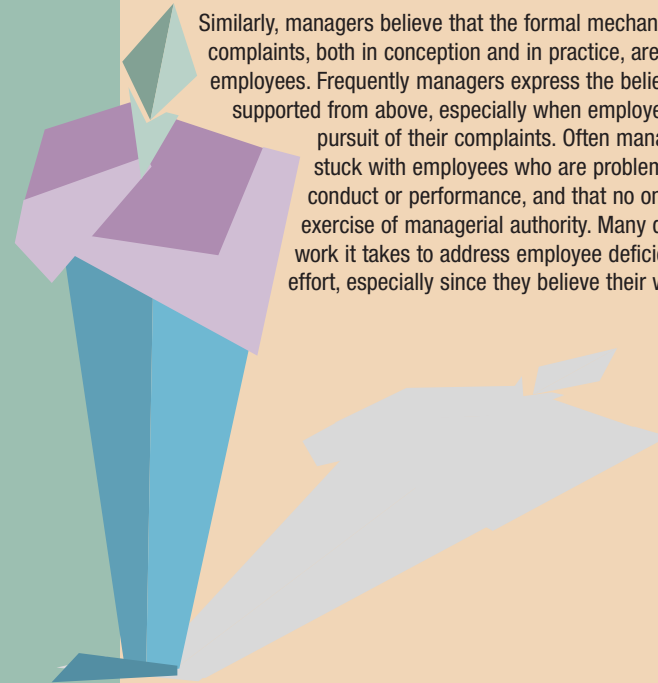
CRITICAL OBSERVATIONS

"Grievances cannot be redressed unless they are known; and they cannot be known but through complaints ... If these are deemed affronts and the messengers punished as offenders, who will henceforth send petitions? ... Where complaining is a crime, hope becomes despair." — Benjamin Franklin

Every large organization necessarily generates an array of dissatisfactions and grievances. Effective organizations find ways to recognize that complaints, even when they are difficult, provide useful information about the functioning of, and morale within, the organization. For this reason, in addition to addressing and resolving problems and complaints, the Office of the Ombudsman has the responsibility to report on the key systemic issues raised by the conflicts and problems it handles.

One of the most striking features of the organizational culture at NIH is that both employees and managers feel the "system" is stacked against them. Many employees who come to the office express skepticism that they can receive a fair hearing for their concerns. They assume that the NIH administrative hierarchy supports any manager about whom a complaint is made. Many employees believe that it is almost impossible to do anything about managers who are perceived as unfair, abusive, or incompetent. Often, formal complaint procedures are distrusted, even when they are used.

Similarly, managers believe that the formal mechanisms for hearing complaints, both in conception and in practice, are biased in favor of employees. Frequently managers express the belief that they will not be supported from above, especially when employees are vociferous in pursuit of their complaints. Often managers lament that they are stuck with employees who are problems, either in terms of conduct or performance, and that no one is willing to support the exercise of managerial authority. Many despair that the amount of work it takes to address employee deficiencies is not worth the effort, especially since they believe their work will go for naught.

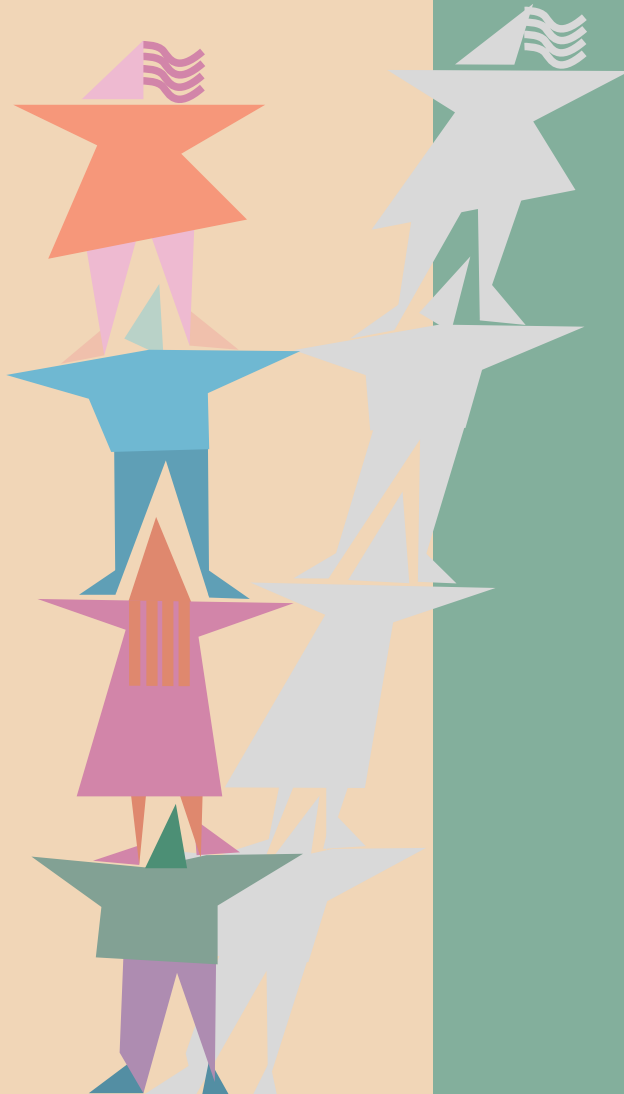


The procedural mechanisms for protecting employee rights are seen as negating managerial authority.

Nowhere is this more apparent than in perceptions of the EEO complaint process. Originally intended as a means to address discrimination in the work place, many people believe it has become an unfocused method by which employees can challenge any managerial action whatsoever, even if that action bears no relationship to anything that might reasonably be considered discrimination. The fact that a complaint of discrimination can be made merely by assertion and that it will be entertained even without substantiating evidence introduces considerable cynicism into the organizational climate.

When people believe that an EEO complaint is more often a procedural maneuver intended to counteract an unfavorable managerial action rather than a sincere expression of perceived discrimination they are less likely to recognize, or to be sympathetic to allegations of discrimination that they might otherwise recognize as “real.” This is especially so because accusations of bias almost always elicit a defensive reaction which can only be overcome by establishing conditions for honest communication between the person making the complaint and the person complained against. But once someone’s dissatisfaction with a managerial action has been framed as an allegation of discrimination the person complained against is necessarily going to defend him or herself against that accusation. Consequently, the “information” contained in that complaint – disagreement about managerial decisions or action, perceptions of unfairness or favoritism - is often not conveyed in an optimal fashion to reach managers and benefit the organization.

Interestingly, many employees are also skeptical about the likelihood of having their concerns addressed adequately by the EEO process. Many doubt that their concerns will be addressed in a timely manner and without the costs of an attorney. Some worry that merely filing a complaint will lead to retaliation. At the



same time, some complainants, when they meet with us, acknowledge that the matters that are bothering them are not, strictly speaking, EEO matters but they believe that filing an EEO complaint is the only way to get management’s attention. However, they are often aware that, at best, there is a finding of discrimination in approximately 5 percent of EEO complaints. (Some believe this proves that the EEO process favors management against employees, even while others take these statistics as a sign that most EEO complaints are unwarranted.)

But there is another feature of the way the EEO systems operate within federal organizations that invites disgruntled employees to use the process even if the odds are against winning in a formal hearing and that adds to managerial distrust. In most federal agencies, NIH included, there is tremendous concern about the public impression fostered by large numbers of EEO complaints. Many administrators worry that the mere fact of EEO complaints will be taken as a sign that there is a problem with discrimination within the organization. Consequently, many managers feel considerable pressure to settle complaints of discrimination rather than to fight them whether or not they believe there is any legitimate basis for such complaints. Contributing to the pressure to settle is the fact that responding to EEO complaints is a time-consuming and costly process and often it is believed that settling is more cost-effective than seeing the process through to the end. Employees are aware of this and many will say that they believe that filing an EEO complaint is the only way to have leverage in dealing with management. Of course, settlement practices create expectations that complaints will be settled independent of merit. The result is a system that serves to exacerbate tensions between employees and managers while satisfying neither. Throughout government one answer to this dilemma has been to expand the use of alternative dispute resolution (ADR) as a means of addressing EEO complaints, which we are helping to do at NIH. However, ADR is not a remedy for a fundamental flaw in the complaint system itself.

Another striking feature of the organizational culture at NIH is the dissatisfaction that both managers and employees feel with regard to a range of administrative personnel issues. Most significant of these is the adoption several years ago, partly as a response to a variety of problems, of a pass-fail system of employee evaluation. While a pass-fail system might reduce the number of rating related conflicts and grievances it is our impression that it creates problems in the long run. A probably unintended consequence of this system is that it has severely reduced the requirement for managers to provide serious, meaningful, substantive feedback to employees about their performance and their conduct at work. Consequently, when a manager does raise issues regarding an employee, it is often experienced as a personal attack, even when delivered in a thoughtful and sensitive way, which, we might add, is not always the case. A pass-fail system, then, removes a formal occasion for the sort of critical exchange between manager and employee that is the responsibility of every good manager.

Further, supervisors’ effectiveness as managers has to be evaluated at least as seriously as the other aspects of their performance. Thus, to the extent that managers lose an opportunity to be evaluated in a meaningful way in their capacity as managers, an unfortunate ripple effect commences throughout the organization. The pass-fail system minimizes the kind of effective feedback that supervisors critically need to develop comfort and skill in their managerial roles. In a related vein, it is a matter of some concern that supervisors are more often promoted into

management responsibilities as a result of their skill in substantive and technical areas as opposed to careful consideration of their fitness to assume, or interest in handling, supervisory responsibilities. Moreover, they typically receive little or no training on how to manage effectively, and they are most extensively evaluated on their handling of issues and concerns within their area of substantive expertise as opposed to their performance of supervisory responsibilities, including providing employees useful feedback and effective mentoring.

Finally, the agency grievance process, which provides employees a formal avenue to redress an official action that an employee feels is unjust (e.g. suspension, reprimand, unsatisfactory final performance appraisal, leave denial), is rarely used. In short, employees feel that the process lacks credibility and do not trust that it is fair or impartial because it requires an employee who wishes to challenge an agency action as unfair to submit a written grievance to the supervisor who has taken the action against them. In an attempt to increase the credibility of the agency grievance process, the Office of the Ombudsman has collaborated with six ICs to pilot a Peer Resolution Panel process. This process would permit an employee to submit an appeal of a denial of his grievance to a randomly selected panel consisting of three employees and two managers.

There are six areas in which changes might benefit NIH:

1 Strengthen formal and informal systems for addressing complaints and conflicts and ensure that those with grievances and complaints work within those systems. When people distrust the system designed to address their concerns they often find ways to go outside or around it. At NIH people unhappy with decisions that do not support their claims too easily find higher-level administrators willing to overrule or in other ways negate

managerial decisions so as to avoid the fuss created by a persistent and vocal complainant, independent of the legitimacy of the complaint. If upper level management believes that the systems for managing employee issues are not functioning properly then it is crucial that those systems be repaired or revisited. A culture that regularly allows people to operate outside its proscribed processes is too easily politicized and, ultimately, undermines its own credibility.

2 Review the current approach to employee performance evaluation. As meaningful and substantive feedback to employees and managers about their performance and their conduct at work is critical, we believe that it is time to reconsider the efficacy of the pass-fail system.

3 Evaluate supervisors on their management responsibilities and provide effective, ongoing training for managers. Recognizing that employees are often promoted into management because of their substantive expertise, it is critical to support them in

their role as managers through effective, ongoing training and through ensuring meaningful feedback.

4 Reconsider the structure of stage one of the agency grievance process. It may be time to evaluate how we can make the agency grievance procedure a more useful process for employees. In particular, this may entail having the employee submit a first stage grievance to a different supervisor in the chain of command than the one who took the action against them.

5 Develop new approaches to addressing racial and other identity issues at NIH. Racial issues are incredibly complex and fraught with dangers, real and imagined, political and social. The EEO process is designed only to address issues of discrimination, but the complexities and subtleties of racial dynamics are not well understood only in the framework of discrimination. This is not to say that discrimination is no longer an issue – it certainly is. However, discrimination is only one dimension of the racial tensions and divisions that exist at NIH, and so long as we can talk about these problems only in terms of discrimination we fear little progress will be made. One step would be to develop opportunities to discuss racial issues outside of the various grievance and complaint mechanisms. Among other things, NIH is a community; and if we are to address racial issues we need to try some of the same approaches that are being tried in other communities: discussion and reading groups, meaningful workshops, community forums, and problem solving taskforces.

6 Shift the focus at NIH away from an exclusive concentration on problems and failures. Although the minority presence at NIH, especially in the sciences, is less than NIH would like, significant numbers of minorities have come to NIH and many have made their careers here. We need to know why – what events, relationships, and experiences have led people to stay at NIH— and see if programs can be developed that help create a base for others to have similar experiences. This sort of appreciative inquiry combined with a solid critical analysis of our problems and failures might help us make progress toward further diversification of the NIH workforce. Over the course of the next year we will be working with the administration at NIH to develop such programs. Clearly, this subject deserves a more extended discussion and we hope to help provide one over the course of the next year.

