

The Department of Health and Human Services  
Implementation Plan  
Presented to  
The National Council on  
Federal Labor-Management Relations



Completed by the  
Department of Health and Human Services  
Labor Management Cooperation Council

March 2010

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Note: This plan provides interim guidance for the National Council on Federal Labor-Management Relations. The plan will be revised as necessary pending review by the Council.

## Acronyms:

Official Name	Acronym
Administration on Aging	AoA
Administration for Children & Families	ACF
Assistant Secretary for Administration	ASA
American Federation of Government Employees	AFGE
Centers for Disease Control and Prevention	CDC
Centers for Medicare & Medicaid Services	CMS
Chief of Staff	COS
Fraternal Order of Police	FOP
Food & Drug Administration	FDA
Health Resources and Services Administration	HRSA
Human Capital Division	HCD
Public Service Employees Union	PSEU
Indian Health Service	IHS
International Association of Fire Fighters	IAFF
Labor Management Cooperation Council	LMCC / Council
Laborers' International Union of North America	LIUNA
National Alliance of Postal and Federal Employees	NAPFE
National Federation of Federal Employees	NFFE
National Institutes of Health	NIH
National Treasury Employees Union	NTEU
Office of the Secretary	OS
Operating Divisions	OPDIVs
Substance Abuse & Mental Health Services Administration	SAMHSA

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## Executive Summary

The Department of Health and Human Services (HHS) has developed an implementation plan which identifies the Departments' labor-management relations goals and the best strategy for accomplishing them.

This implementation plan outlines the major initiatives and objectives that will be accomplished, as well as a table outlining the anticipated time of completion<sup>1</sup>. In accordance with the President's Executive Order (E.O.) 13522, Creating Labor-Management Forums to Improve Delivery of Government Services, the plan describes:

- How HHS will conduct a baseline assessment of the current state of labor-management relations within the Department;
- The extent to which the Department has established labor-management forums;
- Specific metrics to monitor improvements in the areas of labor-management satisfaction, productivity gains, cost savings, etc.;
- The Department's plan for devoting sufficient resources to the implementation plan; and
- Whether the Agency desires to participate in a pilot 7106(b) (1) bargaining project.

HHS believes that this implementation plan is designed to allow both management and labor to have a clear understanding of the best way to operate effectively to accomplish the mission of the agency and achieve our labor relations goals.

HHS also believes that the Federal government should be a model employer. In this regard, we will continue to strive to pursue excellence by re-establishing HHS' commitment to building cooperative labor-management relationships.

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<sup>1</sup> Timeline is located at Appendix A

## I. BACKGROUND

Over the past decade, HHS labor-management relations has continued to evolve while focusing on maintaining a more constructive relationship between labor and management. As of March 2010, HHS has 65,000 employees represented by eight (8) labor Unions, three (3) of which are nationally recognized.<sup>2</sup> Unionized employees make up 43% of HHS' workforce. The three nationally recognized Unions in HHS are American Federation of Government Employees (AFGE), Laborers' International Union of North America (LIUNA) and National Treasury Employees Union (NTEU). The other Unions within HHS are; National Federation of Federal Employees (NFFE), National Alliance of Postal and Federal Employees (NAPFE), International Association of Fire Fighters (IAFF), Public Service Employees Union (PSEU) and Fraternal Order of Police (FOP).

In 2002, HHS established a Labor Management Cooperation Council (LMCC)<sup>3</sup>. The LMCC recognizes that HHS and its Unions have a mutual interest to create and maintain a strong, cooperative relationship between labor and management at all levels. The LMCC is grounded in a shared belief that both management and labor must cooperate in a supportive environment to achieve mutually agreed upon results. This cooperative environment will further strengthen the Department's ability to protect and improve the public health and deliver essential human services.

The LMCC is made up of two (2) representatives from all nationally recognized Unions and one (1) representative from each HHS operating division (OPDIV) where bargaining unit representation exist – Administration for Children and Families (ACF), Administration on Aging (AoA), Centers for Disease Control and Prevention (CDC), Centers for Medicare & Medicaid Services (CMS), Food and Drug Administration (FDA), Health Resources and Services Administration (HRSA), Indian Health Service (IHS), the National Institute of Health (NIH) the Office of the Secretary (OS), Substance Abuse & Mental Health Services Administration (SAMHSA).

The Chief of Staff (COS) serves as chair of the LMCC. Currently, the LMCC meets on a bi-monthly basis<sup>4</sup> to address unique issues, challenges and opportunities facing the Department, its Unions and management, and seeks ways to jointly and responsibly address these issues.

In December 2010, a LMCC sub-committee was established to develop an implementation plan and provide invaluable input on (E.O.) 13522. Members of the LMCC sub-committee consist of the Director, Workforce Relations Division, members from three (3) labor Unions with national recognition: AFGE, LIUNA, and NTEU, as

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<sup>2</sup> The 65,000 employees does not include Commissioned Corps Officers nor federal contractors

<sup>3</sup> HHS LMCC charter is located at Appendix B

<sup>4</sup> LMCC recently increased its frequency in order to further implement (E.O.) 13522

well as LMCC OPDIV representatives and members from the HHS Labor and Employee Relations (LER) community.

Since December 2009, the LMCC sub-committee has met weekly to discuss (E.O.) 13522, while developing strategies to ensure timely completion of the implementation plan.

**To date, the LMCC sub-committee has:**

- Contacted the Office of Personnel Management (OPM) and sent correspondence requesting a seat on the National Council on Federal Labor Management Relations
- Developed metrics to monitor improvements in such areas as labor-management satisfaction, productivity gains, cost savings, etc
- Reached out to external LER community to determine best practices and provided feedback to Department of Transportation on HHS' LMCC
- Coordinated with internal LER community to gather data / information regarding labor-management relations in various OPDIVs. Information gathered includes data on existing labor-management forums throughout the Department
- Coordinated with HHS, Office of Human Resources, Human Capitol Division to develop a baseline assessment / survey
- Developed an informational notice for issuance to OPDIV Heads in support of (E.O.) 13522<sup>5</sup>
- Discussed possible conflict resolution / mediation strategies
- Coordinated with the Federal Mediation and Conciliation Service (FMCS) to facilitate a sub-committee meeting and provide strategies for developing the implementation plan

## **II. BASELINE ASSESSMENT**

After several discussions between labor and management, the LMCC sub-committee determined that conducting a survey was the most effective means for assessing the current state of labor-management relations. The LMCC sub-committee developed a survey which included various questions designed to gauge the “temperature” of labor-management relations throughout the Department.<sup>6</sup> The survey audience consists of:

- 20% of HHS bargaining unit employees
- 20% of HHS non-bargaining unit employees
- A select number of local/chapter representatives and labor and employee relations officers

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<sup>5</sup> The informational notice is located at Appendix C

<sup>6</sup> The base-line assessment/ survey with instructions is located at Appendix D

The survey will be distributed in April 2010. The HHS Human Capitol Division has committed to assisting the LMCC sub-committee with analyzing the data. Upon completion, the data and findings will be provided to the LMCC, OPDIV Heads, and the Unions. The survey is voluntary and all employees' anonymity will be maintained. The survey will provide an in-depth look into labor-management relations and a scale to measure the cooperation between labor and management. In addition, it is both labor and management's hope that the survey will reveal whether a collaborative relationship has a positive effect on agency operations, working conditions, customer service quality, and employee morale or job satisfaction.

The baseline assessment analysis will also be provided to the National Council on Federal Labor-Management Relations (NCFLMR) for review.

### III. LABOR-MANAGEMENT FORUMS

As stated above, HHS has an established Departmental LMCC currently in existence. The LMCC uses the forum to discuss matters that will benefit from the attention of the Council. On a practical level, this means the Council will jointly define goals, set priorities, and develop a workplan on a periodic basis. The LMCC will identify matters for "priority focus," and designate appropriate timeline, responsibilities and recourses to achieve a resolution.

The LMCC will also use the forum to determine: 1) what "pre-decisional" involvement entails; 2) how it will be accomplished; 3) what is expected of the process and; 4) what actions will occur upon its conclusion. To be successful, it is important that all parties have a common understanding of what "pre-decisional" involvement means.

The LMCC sub-committee also looked across the Department to determine where, if any other labor-management forums were established. Based on the sub-committee's review, it was determined that labor-management forums are in existence at the following OPDIVs within HHS.

- Centers for Disease Control and Prevention (CDC) –
  - **CDC/ Agency for Toxic Substances and Disease Registry (ATSDR) -**  
This is a LMCC made up of equal representation from management and Union members. Management representatives on the LMCC are selected by the Director of CDC/ATSDR, or designee, and Union representatives on the LMCC are selected by their local Union official(s). As other Union locals are formed within CDC/ATSDR, they will be invited to join the LMCC. Meeting dates and times will be determined by the LMCC. LMCC will make decisions by consensus. Interest-based problem solving techniques will be used to address and resolve all issues before the Council(s). A facilitator may be used as necessary.
  
- Center for Medicare & Medicaid Services (CMS)-

- **CMS** has one Labor-Management Cooperation Committee at the National level between CMS and AFGE. The Labor-Management Cooperation Committee is comprised of 12 members with an equal number of management and union representatives and meets 4 times per year. The terms of the committee’s function is incorporated into the CMS/AFGE Master Labor Agreement at Article 2.
- Food and Drug Administration (FDA) –
  - **FDA Headquarters** LMCC consists of an equal number of management and union representatives who address FDA non-ORA related issues
  - **FDA/ORA** Headquarters LMCC consists of four management representative and four union representatives who address ORA-related national issues
  - **Center for Devices and Radiological Health (CDRH)** -- Currently has a center level Labor Management Council that meets monthly and quarterly with Union representatives and our VPs.
  - **Center for Food Safety and Applied Nutrition (CFSAN)** -- Currently has a Labor Management Cooperation Council – HR Specialist co-chairs with Union representative.

#### **IV. METRICS TO MONITOR IMPROVEMENTS**

In accordance with (E.O.) 13522, HHS has established metrics which will ultimately provide quantitative data to support conclusions about the effectiveness of labor-management forums. The metrics will focus on the areas of agency operations, working conditions, customer service, cost savings and employee morale or job satisfaction. The metrics were developed using the “SMART” (Specific, Measurable, Actionable, Relevant and Timely) model. Below are the metrics which were developed with key labor-management goals in mind.

**1. Goal: To improve the current state of labor-management relations at HHS**

**Metrics:**

- Frequent use of alternative dispute resolution processes
- Greater Union and employee engagement in pre-decisional matters
- All parties have a better understanding of labor and management rights
- Use of labor-management forum as a venue to discuss and make a good faith attempt to timely resolve proposed changes in conditions of employment<sup>7</sup>

**2. Goal: To improve HHS’s ability to deliver high quality products and services to the American people**

**Metrics:**

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<sup>7</sup> At this time this does not include resolution of subjects set forth in 5 U.S.C. 7106(b)(1) (permissive subjects).



- Improved customer satisfaction
- Better delivery of services
- Cost savings
- Higher productivity

### **3. Goal: Improve the quality of employee worklife**

#### **Metrics:**

- Higher employee morale
- Greater job satisfaction
- Higher retention rates

The LMCC will monitor these metrics quarterly to determine whether labor-management forums have a positive effect on the goals above.

## **V. RESOURCES**

The Department is committed to and understands the importance of dedicating a sufficient amount of resources to the implementation plan. In order to accomplish goals and promote effective labor-management relationships across the Department, the following resources have been identified to assist management and the Union with implementation of labor-management forums.

- Training for LMCC members on the use of interest-based problem solving tools, techniques for managing group dynamics, understanding Union and management rights and other trainings that would be beneficial to the effectiveness of the LMCC.
- Reaching out to facilitators when needed to assist with resolving issues, while developing mutually acceptable solutions.
- Administrative support to assist with preparing for meetings, collecting data, and communicating results.

By improving labor-management relations, it is Department's belief that funding for these resources will come from a reduction in grievance, unfair labor practice, and bargaining dispute resolution costs.

## **VI. 7106(b) (1) BARGAINING PILOT PROJECT**

At this time, the Department will not be participating in the 7106 (b) (1) bargaining pilot project. The Department recognizes that 7106 (b) (1) issues are important matters to

management and the Union; therefore, as we continue to make improvements in the area of labor-management relations we will re-visit this decision at a later date.<sup>8</sup>

## VII. CONCLUSION

HHS is committed and willing to incorporate the principles and goals outlined above into the day-to-day operations of the Department. HHS is excited about re-establishing the Departments commitment to building labor-management relationships and utilizing the LMCC as a forum for communication and cooperation. HHS acknowledges that both labor and management bring the value, talent and resources necessary to provide the highest quality service to the American people, while maintaining a high quality work environment for our employees.

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<sup>8</sup> The Union has expressed that it would like to participate in the 7106 (b) (1) bargaining pilot project, however, the Department would like to leave it to the discretion of the OPDIVs to participate in the pilot project.

## VIII. APPENDIX

### **1. Appendix A – TASK AND DELIVERABLE MILESTONES**

MILESTONE	TARGET COMPLETION DATE	STATUS
Develop survey and metrics.	February 2010	In Process
Distribute baseline assessment to agreed upon population. Agreed upon population consist of: <ul style="list-style-type: none"> <li>• Local Union Officials (Officer/Steward)</li> <li>• Bargaining unit employees</li> <li>• Labor and Employee Relations Officers</li> <li>• International/National Union Representatives</li> <li>• Supervisors and Managers</li> </ul>	April 2010	In Process
Baseline assessment completion date	May 2010	Pending
Departmental LMCC meetings	Bi-monthly	In Process
Review metrics to evaluate whether labor management forums promote better labor-management climate and improve the delivery of products and services to the public	Bi-monthly	Pending

### **2. Appendix B – LMCC CHARTER**

## **Department of Health and Human Services Labor- Management Cooperation Agreement**

### **Department's Labor-Management Cooperation Council**

The Department of Health and Human Services (HHS) and the Unions that represent its bargaining unit employees agree that it is in their mutual interest to create and maintain a strong, cooperative relationship between labor and management at all levels of HHS and at all worksites nationwide. This Agreement is grounded in a shared belief that both

management and labor must cooperate in a supportive environment to achieve mutually agreed upon results in order for HHS to further strengthen its ability to protect and improve the public health and deliver essential human services.

## **Principles of Cooperation**

In order to realize the full potential of HHS, Union and management agree to abide by the following principles:

- Focus on HHS mission achievement by serving the public interest first.
- Work cooperatively together with an emphasis on the goal of "One Department."
- Identify and target mutual interests and shared problems rather than exclusive rights and conflicting positions.
- Share information freely and in a pre-decisional manner, recognizing that informed employee and Union involvement adds value to the quality of a decision.
- Serve as a model of collegial decision-making and cooperative behavior utilizing an interest-based problem solving process in striving for consensus.
- Build a relationship that assures mutual trust, respect, and appreciation for each party's roles and responsibilities.
- Recognize that a cooperative labor-management relationship must promote increased quality, productivity, performance, effectiveness, quality of work-life, and employee opportunities.

## **Labor-Management Cooperation Council**

It is with these principles in mind that management and labor agree to establish an HHS Labor-Management Cooperation Council (HHS LMCC) at the Departmental level. The Parties also encourage management and Union officials at all other appropriate levels of HHS to take steps towards establishing cooperation councils or taking other concrete steps to strengthen the relationship between labor and management throughout HHS nationwide.

### **Scope of Council**

The HHS LMCC will implement the principles on which it is founded by:

- Making decisions on agency-wide issues affecting management, labor and mission achievement when requested by the Secretary, Deputy Secretary or Chief of Staff;
- Exchanging facts and information about department-wide issues affecting management, labor and mission achievement;

- Serving as a forum for discussions and providing guidance on department-wide issues affecting management, labor and mission achievement;
- Promoting and facilitating labor-management cooperation throughout HHS, including cooperative relationships at all appropriate levels; and
- Providing guidance and support to any cooperation councils that may be formed at other levels of HHS.

### **Process of Council**

The HHS LMCC will be comprised of the following members:

1. Two representatives from each of the three Unions having national consultation rights with HHS:
  - The American Federation of Government Employees
  - The Laborers International Union of North America
  - The National Treasury Employees Union
2. One representative from each HHS OPDIV in which a unit of exclusive recognition exists and two from the HHS Office of the Secretary.

The Council will meet quarterly or more often as necessary. The Chief of Staff is the chair and may designate an alternating, substitute or co-chair as necessary. When requested to make a decision by the Chief of Staff or designee, the Council will make those decisions by consensus (where consensus means that an individual's point of view has been heard and the individual can "live" with the final decision and support it outside of the room). The Council may take whatever action is necessary to achieve the objectives of this Agreement. Staff and other guests may be invited with the concurrence of the Chair. In most instances, agendas will be distributed in advance for comments and additions. The standard meeting time will last no longer than one hour.

### **3. *Appendix C – INFORMATIONAL NOTICE TO OPDIVS IN SUPPORT OF LABOR-MANAGEMENT FORUMS***

#### **Executive Order 13522 – Creating Labor-Management Forums to Improve Delivery of Government Services**

##### **Background:**

On December 9, 2009, President Obama issued an Executive Order 13522 requiring the establishment of effective labor-management forums throughout the Federal sector in order to change the nature of Federal labor-management relations and to deliver the highest quality of services to the American people.

**Information/Action:**

This era of relations between employees and managers ushers in a new day for collaboration and cooperation within government. While we are resuming a collaborative process, we are also reaffirming our commitment to the continued development and operations of strong relationships with our Union colleagues. To this end, we embrace the ongoing need to improve and refine our labor-management relationship efforts with a view toward both enhancing our ability to meet mission requirements and improve the quality of work life for all members of the HHS community.

Several OPDIVs have existing labor-management councils and/or committees which involve management, employees, and their Unions in the analysis of matters and options throughout the entire decision-making process. These councils and/or committees have created work environments where everyone is heard, and the best ideas for improving the quality and productivity of HHS services are brought forward then put into action.

Pre-decisional involvement of employees and their Union provides Unions the opportunity to help shape decisions in the workplace without infringing upon management rights. Pre-decisional involvement does not waive management's statutory right to make decisions under the Federal Service Labor-Management Relations Statute (Statute), nor does it waive a Union's right to engage in bargaining prior to implementation to the extent required by the Statute. If properly executed, pre-decisional involvement results in better decisions, faster and full implementation, and less conflict even if bargaining is still required.

The Federal government should be a model employer. In this regard, we enthusiastically support President Obama's Executive Order Creating Labor Management-Forums to improve the delivery of government services. We will strive to pursue excellence by reestablishing HHS' commitment to rebuilding labor-management relationships. The establishment of this Executive Order marks the beginning of a new relationship with employees and their Union representatives as we communicate more effectively, address matters together and foster an environment of trust, thereby nurturing and developing a relationship that will become a true catalyst for reinvention and change.

Our employees are our greatest asset. We urge all OPDIVs to maximize efforts to continue fostering labor-management relationships throughout the Divisions. Together, we will create work environments where all sides work towards shaping a stronger, more effective Federal government.

**Point of Contact:**

Please contact your servicing [Human Resources Center](#) for assistance.

#### **4. Appendix D – INSTRUCTIONS / BASELINE ASSESSMENT SURVEY**

### **Instructions:**

Dear Colleague:

On December 9, 2009, President Obama issued Executive Order 13522, Creating Labor-Management Forums. The purpose of this order is to establish a cooperative and productive form of labor-management relations throughout the executive branch. The Executive Order calls for the creation of the National Council of Federal Labor-Management Relations. The National Council of Federal Labor-Management Relations Council is composed of members appointed or designated by the President and the responsibilities and Functions are outlined in this Executive Order.

The Executive Order also mandates that each department or agency establish labor-management forums by creating labor-management committees or councils, and directed councils to conduct a baseline assessment to determine the current state of labor management relations in its department or agency.

Enclosed is a baseline questionnaire developed by the Department of Health and Human Services' (HHS), Labor-Management Cooperation Council (LMCC). The LMCC is comprised of representatives throughout the department from both management and the Union. The LMCC is grounded in a shared belief that both management and the Union must cooperate in a supportive environment to achieve mutually agreed upon results in order for HHS to further strengthen its ability to protect and improve public health and deliver essential human services.

Although this questionnaire is voluntary, the LMCC would greatly appreciate your participation and is asking that you take a few minutes to complete via the web link below. Questionnaire results will allow us to assess the current state of labor-management relations at HHS to include your respective Operating or Staff Divisions.

**Questionnaire Collection Dates:** This questionnaire will be made available to random bargaining and non-bargaining unit employees April 1 – April 8, 2010.

#### **Questionnaire Instructions:**

1. Please access the survey via this web link.
2. Read each question carefully.
3. Your responses to this questionnaire are completely confidential. Please do not sign the questionnaire form.

4. Questions. If you have any questions, please contact [Jason.Love@hhs.gov](mailto:Jason.Love@hhs.gov)
5. Please complete the questionnaire by April 8, 2010.

To review Executive Order 13522 - Creating Labor-Management Forums to Improve Delivery of Government Services, please visit  
<http://www.presidency.ucsb.edu/ws/index.php?pid=86986>

Thank you for taking time to complete the questionnaire.

## Survey: Labor Management Cooperation Council (LMCC)

*HHS/OHR's Workforce Relations Division appreciates your taking a few minutes to complete this questionnaire to assist the LMCC. Results gathered will only be used to learn about the current state of Labor Relations across the department. Questions 19-23 refer to the term "pre-decisional involvement." For clarity, we have enclosed our definition of this term below to assist in completing your answers.*

*"Pre-decisional involvement" is a term that represents those activities where employees, through their Union (their elected exclusive representatives), are given the opportunity to help shape decisions in the workplace which impact their work."*

### 1) Please indicate whether you are (check all that apply):

- A local/chapter representative of an exclusive representative (Officer/steward)
- A bargaining unit employee
- A Labor Employee Relations (LER) representative of an employer
- A Representative of National/International Union
- A supervisor/management official
- Other

### 2) What Operation Division do you work?

- OS (includes AOA and the PSC)
- FDA
- CDC
- NIH
- IHS
- ACF
- AHRQ
- CMS
- HRSA
- SAMHSA



**3) Where are you located?**

- Washington, DC Metro Area
- Region I
- Region II
- Region III
- Region IV
- Region V
- Region VI
- Region VII
- Region VIII
- Region IX
- Region X
- Other

**4) What is your understanding of the President issued Executive Order (E.O.) 13522, Creating Labor-Management Forums?**

- I have advanced understanding of this E.O.
- I have basic understanding of this E.O.
- I have limited understanding of this E.O.
- At present, I do not have a need to know about this E.O.

**5) Based on your understanding of the President issued Executive Order 13522, you believe that implementation of the President's Executive Order 13522 will result in increased costs in terms of both time and money for Labor Relations Staff.**

- Strongly Agree
- Agree
- N/A
- Disagree
- Strongly Disagree

**6) Based on your understanding of the President issued Executive Order 13522, you believe that implementation of the President's Executive Order 13522 will result in the increased cost in terms of both time and money for bargaining unit staff.**

- Strongly Agree
- Agree
- N/A
- Disagree
- Strongly Disagree

**7) Are you aware that there is an HHS nationwide Labor Management Cooperation Council?**

- Yes
- No
- Not Sure

**8) Based on your opinion, the HHS nationwide labor and management relationship is strong and cooperative.**

- Strongly Agree
- Agree
- N/A
- Disagree
- Strongly Disagree

**9) Based on your opinion, you believe that participation in Labor Management Cooperation Councils is a benefit to HHS.**

- Strongly Agree
- Agree
- N/A
- Disagree
- Strongly Disagree

**10) Based on your opinion, your OPDIV/STAFFDIV labor and management relationship is strong and cooperative.**

- Strongly Agree
- Agree
- N/A
- Disagree
- Strongly Disagree

**11) You have seen an increase in your OPDIV/STAFFDIV successes as a result of improved labor management cooperation**

- Strongly Agree
- Agree
- N/A
- Disagree
- Strongly Disagree

**12) Based on your opinion, current labor management resolution procedures are very effective.**

- Strongly Agree
- Agree
- N/A
- Disagree
- Strongly Disagree

**13) Have you participated in or are you currently a member of a Labor Management Cooperation Council.**

- Yes
- No
- Not Sure

**14) In the past 12 months, have you been involved in any proceedings, including mediations, representation elections, grievances, unfair labor practice complaints, negotiations, arbitrations or the like?**

- Yes - I have been involved with approximately "0-3" cases over the past 12 months
- Yes - I have been involved with approximately "4-6" cases over the past 12 months
- Yes - I have been involved with approximately "7 plus" cases over the past 12 months
- No - Please respond to those questions in the Survey that are not related to a specific proceedings
- Not Sure

**15) Based on your involvement in the proceedings noted in number 14 above, your opinion is that labor relations between management and the Union is positive.**

- Strongly Agree
- Agree
- N/A
- Disagree
- Strongly Disagree

**16) Based on your involvement in the proceedings noted in number 14 above, your opinion is that labor relations between management and the Union is cooperative.**

- Strongly Agree
- Agree
- N/A
- Disagree
- Strongly Disagree

**17) Based on your involvement in the proceedings noted in number 14 above, your opinion is that labor relations between management and the Union led to delivery of high quality services.**

- Strongly Agree
- Agree
- N/A
- Disagree
- Strongly Disagree

**18) Based on your involvement in the proceedings noted in number 14 above, your opinion is that labor relations between management and the Union led to long term solutions.**

- Strongly Agree
- Agree
- N/A
- Disagree
- Strongly Disagree

**19) Are you aware that Executive Order 13522, Creating Labor-Management Forums allow employees and their Union representatives to have pre-decisional involvement in all workplace matters to the fullest extent practicable?**

- Yes
- No
- Not Sure

**20) Based on your opinion, you believe that allowing pre-decisional involvement in all workplace matters to the fullest extent practicable will lead to a more collaborative atmosphere.**

- Yes
- No
- Not Sure

**21) Based on your opinion, you believe that allowing pre-decisional involvement in all workplace matters to the fullest extent practicable will lead to a more effective government.**

- Yes
- No
- Not Sure

**22) Based on your opinion, you believe that allowing pre-decisional involvement in all workplace matters to the fullest extent practicable will lead to the delivery of high quality services.**

- Yes
- No
- Not Sure

**23) Do you believe that management understand and respect current federal sector labor law, management's rights and worker's rights?**

- Excellent
- Very Good
- Average
- Needs Improvement
- Poor

**24) Do you believe that Unions understand and respect current federal sector labor law, management's rights and worker's rights.**

- Excellent
- Very Good
- Average
- Needs Improvement
- Poor

**25) How would you rate the level of satisfaction between Union and management on collaboration.**

- Excellent
- Very Good
- Average
- Needs Improvement
- Poor

**26) How would you rate the relationship between bargaining unit employees and management?**

- Excellent
- Very Good
- Average
- Needs Improvement
- Poor

**27) How do you rate the Chapter/Local Presidents relationship with Labor Employee Relations Specialists/Labor Relations Officers?**

- Excellent
- Very Good
- Average
- Needs Improvement
- Poor

**28) Over the last two years, how have labor-management relations in your work area impacted "trust?"**

- Positive Impact
- Negative Impact
- No Impact
- N/A

**29) Over the last two years, how have labor-management relations in your work area impacted "productivity?"**

- Positive Impact
- Negative Impact
- No Impact
- N/A

**30) Over the last two years, how have labor-management relations in your work area impacted "communication?"**

- Positive Impact
- Negative Impact
- No Impact
- N/A

**31) Over the last two years, how have labor-management relations in your work area impacted "morale?"**

- Positive Impact
- Negative Impact
- No Impact
- N/A

**32) Over the last two years, how have labor-management relations in your work area impacted "work life?"**

- Positive Impact
- Negative Impact
- No Impact
- N/A

**33) Over the last two years, how have labor-management relations in your work area impacted "operational functions?"**

- Positive Impact
- Negative Impact
- No Impact
- N/A

*HHS/OHR's Workforce Relations Division honors, values, and appreciate your thoughts and viewpoints. Please know that that using this Vovici survey application ensures your responses are tallied and remain anonymous. Thank you.*