Performance Management Appraisal Program (PMAP)

CY19 Closeout Guidance & CY20 Establishment Guidance

Contents

IMPORTANT DATES

1/30/20	Deadline to establish CY 2020 PMAP plans for current NIH employees
2/14/20	Deadline to communicate CY19 PMAP performance ratings to all employees who have been on a performance plan for at least 90 days
2/28/20	Deadline to certify completion of CY19 and CY20 PMAPs to OHR
3/27/20	Deadline to submit all CY19 PMAP ratings and related recognition in SMARTHR, (Performance, QSIs, and Time Off Awards)
UPDATE 3/27/20	Deadline to submit all QSI supporting documentation (NIH Form and PMAP coversheet) for the CY20 award cycle to servicing Client Services Division HR Specialist – ALL QSIs MUST be effective by 4/26/2020.
UPDATE 6/30/20	Deadline to complete mid-year Progress Reviews
UPDATE 12/31/20	End of CY20 rating period

CY19 PMAP CLOSEOUT GUIDANCE

RATINGS

- Reference the HHS Performance Management Appraisal Program (PMAP) Policy, dated April 2015, and the HHS PMAP Handbook to complete CY19 PMAP closeout.

- If your Institute is using the ePMAP system, please check with your Institute's ePMAP team for system guidance and instructions.

- Assess and rate employee's performance against each of the critical elements.

- Ratings must be based solely on the employee's performance against the critical elements. **Per 5CFR 430.208(c), Rating Performance, forced distributions and/or quotas are prohibited when completing performance ratings.** However, methods used to make distinctions among employees such as comparing, categorizing, and ranking employees based on their performance may be used for award determinations.

- Calculate and enter the final summary rating on the first page of the performance plan.

  - If an employee receives a **Level 2 - Partially Achieved Expected Results** rating on one or more critical elements, he/she cannot receive a summary rating of higher than Achieved Expected Results, regardless of the average point score. Prior to issuing rating Level 2 –Partially Achieved Expected Results, the rating official **must** work with their servicing Employee and Labor Relations Specialist.

  - If an employee receives a **Level 1 - Achieved Unsatisfactory** results rating on one or more critical elements, a summary rating of Achieved Unsatisfactory Results must be assigned. Prior to issuing a Level 1 – Achieved Unsatisfactory Results

rating, the rating official **must** work with their servicing Employee and Labor Relations Specialist.

- If an employee has not been on a plan for 90 days or is in another unique situation, please refer to the HHS PMAP Guide for Non-Standard Situations and contact your servicing Employee and Labor Relations Specialist.

- Although NIH only requires a higher-level review by a reviewing official when the summary rating is Unacceptable, organizations may require a higher-level review to support ratings at other levels.

- Communicate the **final rating and award** to the employee **only after** higher approval has been obtained (if required).

- HHS is requesting that each OPDIV certify that they have both closed out 2019 performance appraisals and established 2020 performance plans for all employees. Therefore each IC will be required to certify this information to Tracey Headley at Tracey.Headley@nih.gov and copy Luke Daniel at Luke.Daniel@nih.gov no later than **February 28, 2020**.

SMARTHR

- PMAP ratings and awards will be collected, validated, and certified to OHR via SMARTHR.

- ICs that use Excel files may upload their data directly to SMARTHR using an Excel file upload. Spreadsheets must be in one, IC-wide, complete file, which adheres to ALL SMARTHR business rules, in order to upload the data into SMARTHR. The standard excel file template is available in SMARTHR.

- SMARTHR will not issue nor provide technical support for any Excel files used for PMAP purposes. Each IC is responsible for the production, dissemination, support, collections, and consolidation of any Excel files.

- IC Executive Officers (EO) (or designees) are required to certify PMAP information to OHR via SMARTHR before HR can certify the awards. **IMPORTANT REMINDER:** EO certification means that the ratings and awards have been carefully reviewed by IC leadership and are correct and ready for processing.

- **IMPORTANT REMINDER:** Once certified by the EO, changes to the ratings and/or awards **will only be made in highly unusual circumstances,** therefore ICs should review their SMARTHR submission very **carefully** prior to submission.

- Once certified **if discretionary changes are allowed**, ICs will have to recertify their SMARTHR spreadsheet. Those spreadsheets will be placed in queue for processing and will not be processed ahead of other award actions. Discretionary changes include things such as:

  o Employees who decide, after certification of awards, that they wish to receive their award in a different form (trade cash for time off, or vice-versa)

o   Employees who wish to return awards which were otherwise valid when certified

o   Employees who wish to trade a QSI for cash (or time off, or a combination of both)

o   Managers who forgot to issue an award or who after certification, want to change the award type

- PMAP awards will be effective as soon as practicable following certification by the IC in SMARTHR; however, there may be times when it takes longer than anticipated to process the awards. A confirmation email will be sent to the IC certifying official and IC Performance Liaison listed in SMARTHR as well as the servicing Client Services Division Branch Chief.

- Submission of SMARTHR replaces the paperwork requirements for performance awards (cash and time off). The NIH employee awards form (NIH 2833) is still required for Group Awards, Special Act or Service Awards (cash or time off), and QSIs.

NIH POLICY ON PMAP RATINGS WHEN EMPLOYEE MOVES FROM ONE IC TO ANOTHER IC WITHIN 90 DAYS OF THE END OF THE APPRAISAL PERIOD

IMPORTANT: If an employee is on your IC SMARTHR roster as of December 31st, and subsequently moves to another IC, the employee will remain on your roster. We will NOT move employees to the gaining IC's roster.

Scenario	Who Completes Rating?	Who Determines Award Amount?	Who Pays Award?	Who Reports the Rating & Award Amount?
Jane Doe moves from IC (A) to IC (B) in November 2019.	IC (A) completes the final rating and gives the rating to IC (B) for reporting in SMARTHR.	IC (A) may recommend an award amount for IC (B)'s consideration; however, IC (B) makes final award determination.	IC (B) processes and pays the award amount.	IC (B) is responsible for reporting the employee's rating and award to NIH OHR.
John Smith moves from IC (A) to IC (B) in February 2020.	IC (A) completes the final rating and enters the rating in SMARTHR.	IC (A) may recommend an award amount for IC (B)'s consideration; however, IC (B) makes final award determination.	IC (B) processes and pays the award amount.	IC (A) is responsible for reporting the employee's rating and award to NIH OHR.

CLARIFICATION: *IC (A) must inform (IC) B of the recommended award because the awards will be paid by IC (B) and will count against the IC (B) awards allocation. Therefore, if IC (A) recommends an award percentage that is greater than the IC (B) authorized percentage, IC (B) can lower the award percentage to align with their award ranges.*

Revised 3/27/20

AWARDS

- The Office of Personnel Management (OPM) and the Office of Management and Budget (OMB) have issued guidance that applies to awards paid during FY20. It incorporates a spending percentage cap for Individual Performance and Individual Special Act or Service awards for non-SES/SL/ST/Senior Title 42 employees of 1.5% of total aggregate salaries and removes the monetary caps for awards that have been frozen at the FY10 spending levels (i.e., Group, Referral, Suggestion, Invention, and Quality Step Increases).

- **NEW INFORMATION:** Per the HHS Agency Workforce Fund Plan, NIH must use at least 15% of its total award pool on **incentive award** programs, **including but not limited to:** Group awards; Special Act or Service, or On-the-Spot awards; Invention, Innovation, and Suggestion awards, and other non-ratings based (NRB) awards. ICs are advised to monitor their award pool expenditures during the year to ensure compliance.

- Awards are calculated based on the employee's salary and hourly rate as of December 31, 2019.

- NIH PMAP policy **requires** a narrative justification when any type of performance award is approved. A narrative justification is also required for Level 2, Partially Achieved Expected Results or Level 1, Achieved Unsuccessful Results.

- The narrative justification is used to justify the rating and the performance award.

- As a best practice, supervisors are encouraged to request a list of accomplishments from employees to assist them with the development of the narrative.

- Cash awards valued at $10,000 and higher require OPM final approval and will be flagged by the Workforce Relations Division (WRD) and returned to the IC for correction. Awards over $10,000 will NOT be submitted to OPM for approval.

- Employees put on performance plans in mid-November whose plans were extended until they had been on the plan for 90 days, are eligible for a performance award if they have received a rating of record of at least Level 3.

- To request access to SMARTHR, submit an HR System Access ticket.

AWARDS & RATING JUSTIFICATION NARRATIVES

Level 5 Achieved Outstanding Results	Award: Optional award of up to 5% of salary, including locality. This can be in the form of cash and/or a time off, or QSI. There is no minimum percentage, but the percentage awarded for a Level 4 rating may not equal or exceed the minimum percentage awarded for any Level 5 rating. Narrative: A supervisory narrative which addresses how the employee surpassed expectations on a consistent basis is required for <u>all</u> Level 5 ratings.
Level 4 Achieved More than Expected Results	Award: Optional award of up to 4% of salary and can be in the form of cash and/or a time-off award. Within an IC, the percentage awarded for a Level 4 rating may not equal or exceed the minimum percentage awarded for any Level 5 rating. Narrative: If the employee is receiving a performance award, a supervisory narrative which addresses how the employee exceeded the requirements as described in the performance plan is required. If the employee is not receiving a performance award, a narrative is not required.
Level 3 Achieved Expected Results	Award: Optional award of up to 3% of salary and can be in the form of cash and/or a time-off award. Within an IC, the percentage awarded for a Level 3 rating may not equal or exceed the minimum percentage awarded for any Level 4 rating. Narrative: If the employee is receiving a performance award, a brief supervisory narrative which addresses how the employee met the requirements as described in the performance plan is required. If the employee is not receiving a performance award, a narrative is not required.
Level 2 Partially Achieved Expected Results	Award: Ineligible for performance award. Narrative: Prior to issuing a Level 2 rating, the rating official must work with their servicing Employee and Labor Relations Specialist to prepare a Memorandum of Expectations identifying the specific performance deficiencies and explaining how he/she can improve their performance to Level 3. An employee rated and/or currently performing below a Level 3 is ineligible for a Within Grade Increase (WGI).
Level 1 Achieved Unsatisfactory Results	Award: Ineligible for performance award. Narrative: Prior to issuing a Level 1 rating, the rating official must work with their servicing Employee and Labor Relations Specialist. The rating official must give written notice to the employee of his or her failure to demonstrate acceptable performance and give the employee an opportunity to demonstrate acceptable performance under a Performance Improvement Plan (PIP). An employee rated and/or currently performing below a Level 3 overall is ineligible for a within grade increase (WGI).

PERFORMANCE AWARD TYPES

MONETARY AWARDS

- To be eligible for a monetary award, performance summary ratings must be at least Level 3.

- The spending authority is being distributed to ICs based on their total aggregate salaries as of September 30, 2019.

QUALITY STEP INCREASES (QSI)

- QSIs are no longer limited to the FY10 spending levels and do not count towards the 1.5% spending cap. IC should issue these awards judiciously and refrain from increasing amounts to compensate for the individual monetary award restrictions. SMARTHR will continue to track the spending for these award categories separately.

- QSIs can be used to recognize employee performance under PMAP only for GS or GP/GR employees, below the step 10 who receive a Level 5 PMAP rating.

- A QSI should be approved ONLY for employees who have demonstrated exceptional accomplishments that are expected to continue and warrant an ongoing pay increase.

- Employees must have demonstrated sustained performance of outstanding quality and have not received a QSI within the last 52 weeks.

- Each QSI nomination requires separate signatures on an individual NIH Employee Awards Form for processing that employee's QSI. Therefore, an IC cannot submit QSIs as a group award.

TIME OFF AWARDS

- Time Off Awards (TOAs) can be used to recognize employee performance under the PMAP award policy as well as to recognize short-term accomplishments.

- TOAs for PMAP recognition may not exceed 40 hours. Full-time employees may not be granted more than 80 hours of time off during a single calendar year.

- TOAs do not directly count against the 1.5% ceiling. Expressed as an award percentage, TOAs must not exceed the higher award percentage at higher performance levels.

- If the employee is receiving a combination of a cash award and a time off award, the time off award cannot exceed the cash equivalent. If the total hours are less than the cash equivalent, the remaining cash balance, $50 or greater, should be paid as a performance award. Cash performance awards less than $50 will not be processed.

- Each IC will be responsible for entering their own Time-Off Awards earned in ITAS as a result of the 2019 PMAPs.

- TOAs must be entered in SMARTHR in whole amounts only, no fractional amounts.

PART-TIME EMPLOYEE PERFORMANCE AWARDS

- Cash and time off awards for part-time employees must be pro-rated. This is <u>not</u> automatically calculated in SMARTHR or ePMAP.

PERFORMANCE AWARDS FOR EMPLOYEES WHO LEAVE NIH PRIOR TO DECEMBER 31st

- Employees who retire or resign prior to December 31 may be considered for an award at the discretion of the IC. If these employees are not included in SMARTHR, they may be added by the IC.

- Employees who transfer to HHS OPDIVs or other agencies prior to December 31 may be recommended for an award by the IC, however payment and processing of that award is at the discretion of the gaining OPDIV. Awards are coordinated between WRD, the gaining OPDIV, and the NIH IC Performance Liaison.

- Awards can be given to deceased employees. If the employee is deceased, please enter a comment in the notes section of SMARTHR. Payments for these awards are sent to the last known direct deposit account of the employee.

SPECIAL AWARDS REQUIREMENTS

CAREER SES, SL/ST INDIVIDUAL CONTRIBUTION (SPECIAL ACT) AWARDS

NEW INFORMATION: Career SES, SL/ST Individual Contribution awards are distinct from annual ratings-based awards in that it recognizes achievements significantly above and beyond expected job performance and can be awarded at any point in time throughout the year. An award may be used to recognize a contribution (e.g., service on a task force, accomplishment on a detail to other duties, or an effort on a project not anticipated in the employee's annual performance plan) or a scientific achievement that may have culminated after a significant period of time. The award must address all criteria outlined in the Departments Individual Contribution Award Program Guidance.

AWARDS AFFECTING TOTAL COMPENSATION

Total compensation received by Title 5 (General Schedule) employees or SBRS members, in any given calendar year cannot exceed Executive Level I (EX-I). Discretionary payments (e.g., performance awards, cash awards, recruitment/retention/ relocation incentives, Physicians' Comparability Allowances) may be authorized in excess of EX-I but must be deferred and "rolled over" for payment in the next or subsequent calendar year(s). If possible, all or a portion of the deferred payment will be paid lump sum in Pay Period 01 of the new calendar year. However, since deferred payments count toward the aggregate pay limitation in the calendar year in which they are paid, all or a portion of the deferral may continue to "roll over" for payment in future years. Monitoring "rollover" payments is particularly important for SBRS employees whose base pay is at or near the statutory EX-I cap, as payment may

preclude any base pay adjustment (i.e., comparability or discretionary "spring" increase) during the same calendar year.

TITLE 38 PHYSICIAN AND DENTIST PAY SCIENTISTS

The "annual pay" identified for Title 38 Physician and Dentist Pay (PDP) employees is the sum of the employee's GS base pay without locality pay plus Title 38 Market Pay. PMAP awards for Title38 PDP scientists should be calculated on the annual pay. The sum of the GS base pay and any other discretionary pay including PMAP awards is limited on annual basis to EX I ($219,200 in 2020).

For example, on December 31, 2019, a Title 38 PDP scientist's GS non-locality base pay was $90,621 (GS 14, step 1 without locality) and Market Pay was $90,000, for an annual pay of $180,621. The employee receives an Achieved Outstanding results rating and is granted a 2.5% PMAP award. The award would be $4,516 (2.5% of $180,621). The employee may receive the award since the compensation $95,137 (GS non-locality base pay plus the award) does not exceed EX-l. The employee's Market Pay does not count towards the EX I pay cap.

- For questions regarding the calculation of Title 38 PDP award or base pay, please contact Tracey Headley (Tracey.Headley@nih.gov) or Luke Daniel (Luke.Daniel@nih.gov).

Performance awards and cash awards are part of total compensation and must be counted against total compensation limits imposed by the law for Title 38 PDP. In no case may the total compensation paid to a Title 38 PDP scientist exceed $400,000. If proposed total compensation does exceed $400,000, there is no deferral or rollover to the new calendar year of the excess amount.

TITLE 42 (f) AND (g) EMPLOYEES

UPDATE: Performance awards and cash awards are part of total compensation and must be counted against the total compensation limits imposed by HHS for Title 42(f) and (g).

- For Title 42(g), total compensation cannot exceed $250,000.
- For Title 42(f), total compensation cannot exceed $400,000.

NCC or NCCP review and approval of the Deputy Director or Director, NIH, is required for any combination of performance awards and/or cash awards that exceed ten percent of base pay within the preceding 52 weeks. Otherwise, IC Directors may approve PMAP awards for Title 42(g) or Title 42(f) scientists without NCC/NCCP review provided total compensation does not exceed $250,000 or $400,000, respectively. If NCC or NCCP review is required, annotate in the notes section of SMARTHR with a statement such as "HOLD - proposed award pending review/approval by NCC/NCCP". Within the restrictions specified above, IC Directors may grant PMAP awards without the need for NCC or NCCP review.

IC Directors have authority to approve PMAP awards for NIH Distinguished Investigators. PMAP awards cannot be granted that would cause the total compensation of an NIH Distinguished Investigator to exceed $400,000 or the combination of PMAP award and cash awards to exceed 10 percent of base pay. **Non-performance based cash awards must be approved by the NIH Director**.

The HHS Secretary's approval is required for performance awards for employees' whose salaries and bonuses exceed $400,000, as established by HHS Human Resources Manual Instruction 42.1 updated on March 11, 2015. For any awards requiring the HHS Secretary's approval, the IC must provide the complete CY19 performance appraisal (rating of record and narrative justification) to Tracey Headley (Tracey.Headley@nih.gov)**, no later than March 27, 2020.**

In January of each year, prior to the IC's submitting the awards in SMARTHR, the Final Authorizer Unit (FAU) will send an email to the EOs, PMAP Coordinators, and Branch Chiefs asking they provide a listing of all employees who will be exceeding or potentially exceeding the pay cap. The FAU will set a deadline for when the listing needs to be provided to the FAU. Once the listings are received by the FAU, the FAU will provide HRSAID with the IC, the names of the employees and the employee ID's so that they can be separated out from the general population once the spreadsheets are received.

WRD will conduct a more extensive review of the SMARTHR database, specifically for any potential awards that may impact total compensation. This review will take place before SMARTHR is released to the ICs for their ratings and awards entry. We will also conduct an extensive review upon IC certification. We will hold IC awards processing for up to 1 week, pending this review. This will be done in an increased effort to ensure that no awards exceeding total compensation are processed prior to NIH or HHS review and approval.

If Director, NIH or Secretary, HHS approval is required, annotate the notes section of SMARTHR with a statement. The note indicates that the award will <u>not</u> be processed. This will be a 2nd review and should match the listing provided to the FAU previously.

PMAP RATINGS AND AWARDS FOR AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE (AAAS) FELLOWS

PMAP awards for the NIH-AAAS Fellows are processed by OD/OSP and must conform to the annual OD policy on awards. The NIH OD guidance on awards may change each year, but the awards among the AAAS S&T Policy Fellows will be consistent within the program. Each placement office is responsible for the payment of any cash awards.

- While all cash awards are paid from your budget, they do NOT count against your award pool. They will NOT be in your SMARTHR reports.

- The AO or supervisor must submit the PMAP rating associated with any PMAP award nomination to the NIH AAAS Fellowship contact Susan Diggs

(Susan.Diggs@nih.gov) **no later than February 15, 2020** for inclusion in the OSP award spreadsheet. The nomination must include the following information:

- o *Numerical PMAP score.*
- o *If being rated of 4.50 or above, a narrative justification for the award*
- o *Type of recommended award (e.g. time-off, cash, or a combination). Most awards in FY18 were either Time Off Awards or a combination of Time Off and Cash).*
- o *Amount of nominated award (e.g. hours of time off; cash award amount)*

CY20 PMAP PLAN ESTABLISHMENT

PMAP COVERAGE

All General Schedule (GS), Title 42 (f) and (g) not covered under the Senior Executive Service Performance Management System (SES PMS), Senior Biomedical Research Service (SBRS), and Wage Grade (WG, WL, WS) employees continued to be covered under PMAP for CY20.

PMAP PLAN ESTABLISHMENT

- Reference the HHS Performance Management Appraisal Program Policy and HHS PMAP Handbook to establish CY20 PMAP plans.

- If your Institute is using the ePMAP system, please check with your Institute's ePMAP team for system guidance and instructions.

- PMAP plans for current employees must be established no later than January 30, 2020. If an employee enters a position after the start of the appraisal cycle, a PMAP plan must be established within thirty (30) days of the date the employee enters on duty.

- **IMPORTANT REMINDER:** Critical Elements related to Patient Safety and language addressing Privacy Act training listed in CY19 plans are still required. Please ensure these are included in CY20 plans.

- **NEW FOR CY20:** Language for supporting the NIH's commitment to anti-harassment is required in all SES/SL 2020 performance plans. ICs have the option to include anti-harassment language in non-SES/SL CY20 PMAPs. Sample language is included below and may be automatically added to ePMAP across the IC. To include this language please contact NHLBIePMAP@mail.nih.gov.

Supervisors	Staff
Demonstrate support for and compliance with Manual Chapter 1311: Preventing and Addressing Harassment and Inappropriate Conduct by… 1) consistently working to prevent and address harassment and inappropriate conduct in the workplace, promoting a safe and civil organizational culture, and creating an environment where all individuals are treated with respect and dignity; and 2) actively support the implementation of your IC-specific Anti-Harassment	Demonstrate compliance with Manual Chapter 1311: Preventing and Addressing Harassment and Inappropriate Conduct by… 1) consistently communicating in a manner that promotes and facilitates a safe and civil organizational culture; 2) promptly reporting if you have experienced or witnessed harassment, inappropriate conduct, threats, intimidating or bullying behavior to appropriate authorities (such as your supervisory chain of command, the NIH Civil Program, or the NIH police); and 3) cooperating fully in administrative inquiries of allegations of harassment and inappropriate conduct.

Revised 3/27/20

- **UPDATE - NEW FOR CY20**: In support of the NIH's Optimize IT Security Initiative and Cyber Safety Awareness campaign, the following language is mandatory for all CY20 PMAP Plans for the following positions: CIO, ISSO, non-SES Executive Officers, and Managers with significant IT and IT security responsibilities (whose role would include performing the kind of activities in the bullets listed below).

  This language may be incorporated into an appropriate critical performance element, or incorporated into the Administrative Requirements critical element, or added as its own critical element.

  IT/Cybersecurity
    - Develop and implement Cybersecurity Plan of Action and Milestones that describe the approach, current status, and plans to reduce risk and improve the overall cybersecurity posture for your IC
    - Establish explicit expectations and ensure adequate training to hold employees accountable for protecting sensitive information
    - Complete risk assessments and security plans for IC systems and data resources
    - Perform continuous monitoring and periodic testing of security controls
    - Resolve security vulnerabilities within prescribed time frames
    - Deploy NIH cybersecurity technologies

- Each critical element must be written at Level 3 – Achieved Expected Results (AE). Supervisors should closely review the Benchmark Standards beginning on page 11 of the HHS PMAP Handbook to ensure they are truly developing standards at Level 3.

- The supervisor should provide each employee with an opportunity to review and provide input on the development of their critical elements prior to finalizing. Final authority for establishing the performance plan rests with the supervisor.

- At least one critical element must cascade from one of the following strategic plans and/or any internal IC strategic plans. The cascaded element should be identified in the following way under the appropriate element in the performance plan, "This element supports [*insert goal/objective from applicable strategic plan*]."

    - NIH Strategic Plan for FY 2016 – 2020
    - HHS Strategic Plan for FY 2018 - 2022 – Any goal or objective from the plan may be used and/or all staff may use Goal 4: Foster Sound, Sustained Advances in Science or Goal 5: Promote Effective and Efficient Management and Stewardship.
- Each critical element must include at least one accompanying metric that is quantifiable and results-based. Metrics should address significant program outcomes and improvements such as: enhanced quality of services and healthcare, new knowledge and insight from research, and/or improvements in customer satisfaction.

- The supervisor and the employee both sign the PMAP form upon issuance. The

employee's signature officially certifies that performance expectations have been communicated by the supervisor to the employee. In those instances where the employee refuses to sign, the supervisor must note the refusal on the form.

- The supervisor will retain the original form and provide the employee with a copy.

- Although NIH does not require a reviewing official to conduct a higher-level review of the performance plan, ICs may require a higher-level review by a reviewing official.

PATHWAYS PROGRAM PARTICIPANTS

Each Pathways participant, regardless of appointment duration, should be placed on a formal performance management plan. This plan will help the participant to understand what is expected of her or him during the Program and will allow the supervisor and other officials to provide objective feedback regarding her or his performance. ICs should complete evaluations annually and hold mid-year reviews. ICs are also expected to provide regular feedback and identify any deficiencies or areas of improvement for Interns and Interns NTE.

TIPS FOR ESTABLISHING AND MONITORING PERFORMANCE

DO…

- Set clear, meaningful, and attainable expectations, aligned with the mission and broad objectives of your programs, which are reasonably attainable during the performance year.
- Be mindful when setting expectations that CY20 will be a 9-month performance year, with mid-years to take place by 5/14/20.
- Approach this process as a collaborative effort, engaging staff and seeking out employees' ideas to develop appropriate critical elements.
- Continually assess and communicate progress regarding performance - constructive feedback includes timely, specific references to predefined targets and goals.
- Provide for coaching, mentoring, and new learning, using traditional and innovative means to optimize employee strengths and address areas targeted for improvement.
- Describe what the employee will accomplish during the rating period.
- Focus on the results and contributions that you want the employee to achieve.
- Demonstrate appreciation of employee performance through the use of the many available forms

DON'T…

- Create goals that cannot be linked to the organization's primary mission, or that cannot reasonably be attained during the CY20 performance year.
- Finalize a performance plan without obtaining the employee's input and feedback
- Save all of your feedback until the end of the performance year.
- Assume that employees already possess all the knowledge and skills they will need to accomplish the objectives in their performance plan.
- Take away an employee's essential job duties as a response to poor performance. If the employee's performance is not meeting expectations in any critical element, contact your servicing Employee & Labor Relations Specialist for guidance.
- Restrict your performance monitoring activities only to addressing problems.
- Describe how the employee will do the work by focusing on tasks and activities listed in the position description (a PMAP is not a Position Description).
- Assume that employees already possess all the knowledge and skills they will need to accomplish the objectives in their performance plan.

ADDITIONAL RESOURCES

NIH PMAP website

Developing Critical Elements

NIH Sample Critical Elements

HHS Guide for Writing Performance Plans

Supervisors Guide for Addressing Unacceptable Performance

Opportunity to Demonstrate Acceptable Performance (ODAP)

Seven Management Tips for Supervisors

HHS PMAP website

OPM Performance Management website

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