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| **Performance Metric 1.1.1**<br>**Establish a Multi-modal Team to Study Emerging Transportation Technologies** |
| **Strategic Goal 1:** Ensure our preparedness for investigations involving emerging transportation technologies and systems |
| **Strategic Objective 1.1:** Prepare the agency for new transportation technologies and systems |
| **Performance Target**: Recommendations to prepare for new technologies |
| **Offices:** Agency (MD Led) |
| **Definition**: This metric establishes a multi-modal team to evaluate new and emerging technologies in the transportation industry. This team's objective will be to evaluate new and emerging technologies and their operational capabilities so the team can then recommend new or revised investigative processes, equipment, training, analytical methods, alliances, and/or other actions the agency must take to ensure our preparedness for accident investigations of the future. Focusing on transportation technologies that will be used now through 2030, such as commercial space transportation, autonomous vehicles, and urban air mobility, will allow us to understand how investigations involving these technologies must be conducted to build and maintain the NTSB's credibility with related transportation industry stakeholders and make effective safety recommendations to fulfill our mission.<br><br>Our ability to conduct comprehensive investigations requires continuing staff development and acquisition of the essential tools and equipment necessary to understand and investigate accidents involving these advanced systems and technologies. To develop staff, agency processes, and acquire the necessary tools and equipment, we must first assess what future emerging transportation technologies will be operating and determine how best to approach them from multimodal and mode-specific perspectives.<br><br>This metric will establish a multimodal NTSB team knowledgeable in emerging transportation technologies to develop best practices for investigating such technologies and operational capabilities. The team will evaluate new and emerging technologies to provide recommendations for readiness and effectiveness. |
| **Standards:**<br>Green: All milestones have been established.<br>Yellow: At least 50 percent of milestones has been completed.<br>Red: Less than 50 percent of milestones has been completed. |
| **Milestones:**<br>April 15: Team established, held first kickoff meeting, and drafted team charter.<br>July 15: Mid-point report of interim findings delivered by the team.<br>September 30: Report recommending initial steps to prepare us for investigating these new and emerging technologies submitted to MD and senior leadership. |
| **DATA VALIDATION AND VERIFICATION** |
| **Data Sources:** agency documentation; other sources deemed necessary for the Team |
| **Calculation:** Evaluate new technologies and develop recommendations report |
| **Validation/Verification Method:** Office Director or Deputy verification approval; final MD review or approval. |
| **Data Limitations:** Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives), adequate personnel, or adequate time to address issues and risks raised by reviewers. |

| Performance Metric 1.1.1 |
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| **Establish a Multi-modal Team to Study Emerging Transportation Technologies** |

**Compensation for Data Limitations:** Office Directors and senior leadership will discuss identified risks for further mitigation.

| Performance Metric 2.1.1<br>Capture expanded labor cost accounting data from new time and attendance platform |
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| **Strategic Goal 2:** Improve processes and products |
| **Strategic Objective 2.1:** Improve enterprise data governance |
| **Performance Target**: Approved project plan for access and use of expanded data |
| **Offices:** Agency (AD/OCIO/MD Led) |
| **Definition**:  This metric establishes a process to support expanded use of labor cost accounting data for managing and monitoring the performance of agency processes.  NTSB will establish a project team and work with the Department of the Interior's, Interior Business Center (IBC) to enable the NTSB to access and obtain acceptable use of expanded data from the time and attendance platform. |
| **Standards:**<br>Green: All milestones have been established.<br>Yellow: At least 50 percent of milestones has been completed.<br>Red: Less than 50 percent of milestones has been completed. |
| **Milestones:**<br>Quarter 2 (March 31): Signed MOU with IBC to ensure the labor cost accounting process is maintained as a requirement in the new T&A system. IBC led enhancement approval workshop completed.<br>Quarter 3 (June 30): Identify data transfer requirements; Begin developing guidance for access and appropriate use of expanded data.<br>Quarter 4 (September 30):  Approved project plan for access and use of expanded data. |
| **DATA VALIDATION AND VERIFICATION** |
| **Data Sources:** IBC, QuickTime, WebTA, other documents or policies |
| **Calculation:** Evaluate expanded data; test data; develop updated guidance and draft project plan for approval**.** |
| **Validation/Verification Method:** Office Director or Deputy verification approval; final MD review or approval. |
| **Data Limitations:** Factors beyond our control, such as IBC schedule, adequate personnel, or adequate time to address issues and risks raised by reviewers, integrating existing data into new system. |
| **Compensation for Data Limitations:** Office Directors and senior leadership will discuss identified risks for further mitigation. |

| Performance Metric 2.1.2 |
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| **Improve agency Records Management Program** |

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| **Strategic Goal 2:** Improve processes and products |
| **Strategic Objective 2.1:** Improve enterprise data governance |
| **Performance Target:** Finalize office record management file plans |
| **Offices:** Agency (OCIO Led) |

**Definition**: This metric establishes a process to identify and evaluate resources required to improve the Records Management (RM) program (ex. technology and human resources); conduct an agency-wide comprehensive inventory of all records; align agency policies with National Archives and Records Administration (NARA) requirements; and provide training and awareness.

The Office of the Chief Information Officer (OCIO) will lead the RM Task Force for completing this business process improvement project. The project will resolve outstanding NARA inspection findings and adhere to federal requirements.

The RM Program at NTSB will have sufficient policies, processes, and procedures for:
- Managing active records
- Managing an inventory of the agency's records with an electronic data management system
- Handling inactive records
- Transferring records to NARA or the Federal Records Center
- Disposition of temporary records in accordance with approved record schedules
- Agency-wide Records Management training
- Periodic evaluation of records management practices and policies

All electronic and non-electronic information regardless of media, including information on shared drives, will be reviewed to determine the disposition of those records. All offices will manage records according to established records life cycles.

The fiscal year 2022 evaluation includes conducting an agency-wide records inventory, coordinating with NARA to evaluate and create draft office file plans, consolidating collected record information and file plans into central records inventory system and providing the approved plans on the agency portal. Working with an agile approach, OCIO will review offices records inventory to finalize their file plans based on resources and the NARA review, which will include agency record schedules.

**Standards:**

Green: Inventory all office records; create office file plans; office file plans have been coordinated through office heads and RM Chief; approved by senior leadership; office file plans are published to the Portal in the SMIR electronic Handbook.

Yellow: At least 50 percent of office file plans have been created, reviewed, and published to the Portal in the SMIR electronic Handbook.

Red: Less than 50 percent of office file plans have been created, reviewed, and published to the Portal in the SMIR electronic Handbook

**Milestones:**

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| **Performance Metric 2.1.2**<br>**Improve agency Records Management Program** |
| Quarter 1 (December 31): Conduct officewide records inventory.<br>Quarter 2 (March 31): Coordinate review of NARA-provided draft file plans with each office to determine accuracy of captured records information for inventory listing.<br>Quarter 3 (June 30): Submit proposed office file plans to senior leadership for approval.<br>Quarter 4 (September 30): Publish approved office file plans with progress status to InsideNTSB in the SMIR Electronic Handbook |
| **DATA VALIDATION AND VERIFICATION** |
| **Data Sources:** Published records plans in Operations Bulletins, SMIR electronic Handbook; Other RM documents; office records and databases captured in the agency's electronic records inventory system. |
| **Calculation:** Review and evaluate current inventory; establish agency/office records management file plans; publish office file plans with  progress status on agency's Portal in the SMIR electronic Handbook. |
| **Validation/Verification Method:** Office Director or Deputy verification approval; final MD review or approval. |
| **Data Limitations:** Factors beyond our control, such as NARA timelines for review; budgetary constraints (funding in support of activities or initiatives), investigation launch priority, adequate personnel, adequate time to address issues or risks raised by reviewers. |
| **Compensation for Data Limitations:** Office Directors and senior leadership will discuss identified risks for further mitigation. |

| Performance Metric 2.1.3<br>Complete Agency-wide Data Maturity Assessment |
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| **Strategic Goal 2:** Improve processes and products |
| **Strategic Objective 2.1:** Improve enterprise data governance |
| **Performance Target**: Assessment completed |
| **Offices:** Agency (MD Led) |
| **Definition**:  In accordance with the *Foundations for Evidence-Based Policymaking Act of 2018 (Evidence Act)* and the *OMB's Memorandum M-19-23*, we are increasing our use of data to allocate resources and achieve program objectives. The Evidence Act requires agencies to invest in and focus on the "management and use of data and evidence linking spending to program outputs, delivering on mission, better managing enterprise risks, and promoting civic engagement and transparency."<br><br>Using the data maturity assessment outcomes to develop and implement a multiyear data strategy and governance plan, as prescribed by the *Federal Data Strategy, 2021 Action Plan*, will fundamentally transform how data are managed and used to create value for the agency.<br><br>The purpose of the data maturity assessment is to evaluate current capabilities and needs. It provides us an opportunity to assess our infrastructure, and evaluate ourselves against documented best practices, determine gaps, and identify priority areas for improvement. The maturity assessment results will inform investment decisions and prioritize effort improve agency data maturity. The NTSB Data Governance Body will use the results of the maturity assessment to set and prioritize data governance and technology infrastructure goals for the next 3 years, following the objectives and milestones in the Federal Data Strategy annual action plan. |
| **Standards:**<br>Green: All milestones have been established.<br>Yellow: At least 50 percent of milestones has been completed.<br>Red: Less than 50 percent of milestones has been completed. |
| **Milestones:**<br>Quarter 1 (December 31): Workgroup to obtain data maturity assessment contract.<br>Quarter 2 (March 31): Initial data maturity assessment completed.<br>Quarter 3 (June 30): Present draft results of data maturity assessment to the NTSB Data Governance Body.<br>Quarter 4 (September 30): Assessment results approved. |
| DATA VALIDATION AND VERIFICATION |
| **Data Sources:** Data governance body documents; data applications, records, or systems; operation bulletins, standard operating procedures, or other sources of information needed to conduct the assessment. |
| **Calculation:** Conduct initial data maturity assessment; review and evaluate results and get approval. |
| **Validation/Verification Method:** Office Director or Deputy verification approval; final MD review or approval. |
| **Data Limitations:** Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives), adequate personnel, or adequate time to address issues and |

| Performance Metric 2.1.3 |
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| Complete Agency-wide Data Maturity Assessment |
| risks raised by reviewers. |
| **Compensation for Data Limitations:** Office Directors and senior management will discuss identified risks for further mitigation. |

| **Performance Metric 2.2.1** |
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| **Submit Agency Risk Profile to OMB** |

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| **Strategic Goal 2:** Improve processes and products |
| **Strategic Objective 2.2:** Improve enterprise risk management |
| **Performance Target**: Risk profile submitted to OMB |
| **Offices:** Agency (MD Led) |
| **Definition**:  Improving upon our current risk management process provides us with a logical and systematic process for making decisions and responding to risks and opportunities as they arise. An acceptable level of Enterprise Risk Management (ERM) maturity is essential for us to successfully address challenges in a dynamic federal environment. Establishing portfolio and project management tools to develop and apply ERM principles is key to remaining resilient in changing environments.  It also provides a best-practice approach to identifying and managing potential events that may impact our agency and provides a management structure to oversee and implement risk management activities.<br><br>This metric continues our implementation of the agency's risk management program as described in operation bulletin OPS-GEN-128 by submitting the agency's risk profile to the Office of Management and Budget (OMB). Establishing the agency's ERM working group (ERMWG) to help update evaluate and finalize the profile for review by the Senior Management Oversight Council (SMOC). |
| **Standards:**<br>Green: All milestones have been established.<br>Yellow: At least 50 percent of milestones has been completed.<br>Red: Less than 50 percent of milestones has been completed. |
| **Milestones:**<br>Quarter 1 (December 31): Risk Management Team drafts initial risk assessment & profile.<br>Quarter 2 (March 31): ERMWG established and evaluated assessment & profile.<br>Quarter 3 (June 30): ERMWG finalizes profile, and the Chief Risk Officer submits to SMOC for approval.<br>Quarter 4 (September 30): Risk profile submitted to OMB. |
| **DATA VALIDATION AND VERIFICATION** |
| **Data Sources:** Agency documents; risk assessment; risk register |
| **Calculation:** Review agency documents; develop risk assessment, risk register and risk profile |
| **Validation/Verification Method:** Office Director or Deputy verification approval; final MD review or approval. |
| **Data Limitations:** Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives), adequate personnel, or adequate time to address issues and risks raised by reviewers. |
| **Compensation for Data Limitations:** Office Directors and senior leadership will discuss identified risks for further mitigation. |

| Performance Metric 2.3.1 |
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| **Implement Capital Planning and Investment Control  Process** |

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| **Strategic Goal 2:** Improve processes and products |
| **Strategic Objective 2.3:** Improve information technology |
| **Performance Target**:  Implement operation bulletin & pilot new CPIC process |
| **Offices:** Agency (OCIO/OCFO Led) |

**Definition**:  This metric establishes a process to evaluate operations bulletin CIO-GEN-022, Capital Planning and Investment Control (CPIC) and implement a new process. CIO-GEN-022 provides the policy for ensuring that Information Technology (IT) investments and expenditures are aligned with the agency's mission and strategic objectives.  Furthermore, it establishes one process for the review and selection of information technology (IT) investments and expenditures.

CPIC uses a systematic selection, control, and continual evaluation process to ensure that an investment supports the agency's mission and business needs by:
- providing a framework for making NTSB IT decisions and ensuring clear alignment between IT initiatives and NTSB strategic goals and objectives
- establishing and implementing guidelines for reviewing and assessing projects to address identified requirements and for selecting and prioritizing viable projects for funding
- establishing investment/project categories for tailoring the CPIC requirements appropriately
- providing a structure and process for NTSB executive and managerial involvement in IT decision-making, project oversight, and review; and
- resolving IT issues of enterprise importance.

We will review and revise CIO-GEN-022 based on recommendations identified, which may also require revisions to other related and impacted operations bulletins or policies.

This fiscal year, the goal is to update the operations bulletin while baselining our current IT portfolio and piloting the updated CPIC process to provide lifecycle cost estimates for capital expenditures and investments that can be used to support agency budget requests.

**Standards:**
Green: All milestones have been established.
Yellow: At least 50 percent of milestones has been completed.
Red: Less than 50 percent of milestones has been completed.

**Milestones:**
June 30: Review and revise CPIC operations bulletin.
Aug 31: Submit CPIC operations bulletin to senior leadership for approval.
September 30: Align, document, and baseline IT portfolio process with approved CPIC policy.

**DATA VALIDATION AND VERIFICATION**

**Data Sources:** Operations Bulletin CIO-GEN-022; other agency policies or procedures.

**Calculation:** Evaluate operation bulletin and updated based on current agency processes and procedures; implement CPIC process and baseline current IT portfolio.

**Validation/Verification Method:** Senior leadership verification approval; final MD review or

| Performance Metric 2.3.1 Implement Capital Planning and Investment Control Process |
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| approval. |
| **Data Limitations:** Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives), adequate personnel, or adequate time to address issues and risks raised by reviewers. |
| **Compensation for Data Limitations:** Office Directors and senior leadership will discuss identified risks for further mitigation. |

| **Performance Metric 2.4.1**<br>**Document New Board Meeting Format Process** |
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| **Strategic Goal 2:** Improve processes and products |
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| **Strategic Objective 2.4:** Improve the effectiveness of agency processes and products |
| **Performance Target**: process changes documentation approved |
| **Offices:** Agency (HS Led) |

**Definition**:  This metric completes our evaluation of our current Sunshine Act meeting format to improve effectiveness and efficiency. A multi-modal, cross-agency workgroup was formed to review the effectiveness of our Sunshine Act meetings and to consider ways that the Board can maximize the benefits of holding them.  The workgroup studied the effectiveness of Board meetings as a tool for communicating to the industry (including regulators and lawmakers), advocating for safety improvements, and reaching the constituents affected by the tragedy. The study evaluated the visibility of these meetings and ways to identify metrics to measure the benefits of Board meetings.  The workgroup used data to update the present Board meeting process and the format of the Board meeting itself.  Pilot board meetings were conducted in calendar year 2021 and the first quarter of 2022.

This metric will finalize and memorialize the new process and provide the workgroup's evaluation, analysis, and recommendations at the end of the fiscal year.

Documentation could be developing a Board meeting InsideNTSB webpage; operations bulletin, white paper or any other format deemed appropriate by the working group and approved by the Managing Director.

**Standards:**
Green: All milestones have been established.
Yellow: At least 50 percent of milestones has been completed.
Red: Less than 50 percent of milestones has been completed.

**Milestones:**
Quarter 1 (December 31): Hold board meetings with new format and gather data.
Quarter 2 (March 31): Hold board meeting with new format; gather data; determine documentation for communicating new process and change.
Quarter 3 (June 30): Draft documentation of new process and changes and provide to MD or senior leadership for approval.
Quarter 4 (September 30): Process changes documentation approved and posted to InsideNTSB.

| **DATA VALIDATION AND VERIFICATION** |
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| **Data Sources:** Board meeting criteria; Sunshine Act; other agency sources. |
| **Calculation:** Workgroup reviews current processes, newly developed criteria, and recommendations to develop documentation to memorialize the new process and Board meeting changes and any guidelines developed. |
| **Validation/Verification Method:** Office Director or Deputy verification approval; final MD review or approval. |
| **Data Limitations:** Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives), adequate personnel, or adequate time to address issues and risks raised by reviewers. |

| **Performance Metric 2.4.1**<br>**Document New Board Meeting Format Process** |
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| **Compensation for Data Limitations:** Office Directors and senior leadership will discuss identified risks for further mitigation. |

| **Performance Metric 2.4.2** |
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| **Examine Administrative Law Judge Hearing Venues** |
| **Strategic Goal 2:** Improve processes and products |
| **Strategic Objective 2.4:** Improve the effectiveness of agency processes and products |
| **Performance Target**: Hearing Guidance Policy Developed |
| **Offices:** ALJ |

**Definition**: This metric will evaluate our current Administrative Law Judge (ALJ) hearings format (in person only or virtual venues) to determine effectiveness and efficiency. The results of that review could then inform any policy governing hearing venues.

An agile approach to examine the ALJ hearing venues is necessary for process improvements and establishing recommendations for improvement. Standardizing and formalizing venue selection guidance is critical to minimizing agency risks and improving the agency's standard operating procedures. Developing a guidance document for selection of hearing venue is a first step to improve this process.

Powers of the law judge are enumerated in 49 CFR § 821.35(b), and include the power:

> (1) To give notice of, and to hold, prehearing conferences and hearings, and to consolidate proceedings which involve a common question of law or fact
> (2) To hold conferences, before or during the hearing, for the settlement or simplification of issues
> (6) To regulate the conduct of hearings.

Time and location of hearings are defined in 49 CFR § 821.37

> (a) ***Time and location of hearing.*** The law judge to whom the proceeding is assigned (or the chief judge) shall set a reasonable date, time, and place for the hearing. Except as provided with respect to emergency proceedings in § 821.56(a), a written notice of hearing shall be served on the parties at least 30 days in advance of the hearing. The law judge may set the hearing for a date fewer than 30 days after the date of the issuance of the notice of hearing if all of the parties consent to an earlier hearing date. In setting the date of the hearing, due regard shall be given to the parties' discovery needs. In setting the place of the hearing, due regard shall be given to the location of the subject incident, the convenience of the parties and their witnesses, and the conservation of Board funds. Another relevant factor in determining the place of the hearing is the convenience of the hearing site to scheduled transportation service. Only in the most extraordinary circumstances may consideration be given to locating a hearing in a foreign country.

> (b) ***Hearing in several sessions.*** Where appropriate, the law judge may hold a hearing in more than one session, at the same or different locations.

While our rules do not address virtual hearings, we have conducted virtual hearings, mostly in emergency cases, during the pandemic. When we resume hearings in person, in courtrooms across the country, there may be some cases in which a virtual hearing may be preferred. Although many factors are considered when determining the venue, one factor might be a

| **Performance Metric 2.4.2**<br>**Examine Administrative Law Judge Hearing Venues** |
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| medical certificate denial case in which only expert medical testimony would be offered and any credibility determination for such witnesses may be less contentious. |
| **Standards:**<br>Green: Guidance finalized<br>Yellow: Draft guidance proposed for review.<br>Red: Guidance drafted |
| **Milestones:**<br>Quarter 2 (March 31): Review applicable law and current polices and draft guidance for review by ALJ and GC.<br>Quarter 3 (June 30): Draft guidance submitted to Managing Director for review.<br>Quarter 4 (September 30): Final guidance approved. |
| **DATA VALIDATION AND VERIFICATION** |
| **Data Sources:** 49 U.S.C. § 44703(d)(2); ALJ regulations; current policies and procedures; other data or information necessary for developing the guidance. |
| **Calculation:** Draft guidance document; submit for review. |
| **Validation/Verification Method:** Office Director or Deputy verification approval; final MD review or approval. |
| **Data Limitations:** Factors beyond our control, such as perceived credibility issues; type of case (emergency vs. non-emergency); hearing scheduling, budgetary constraints (funding in support of activities or initiatives), judge availability, adequate personnel, adequate time to address issues and risks raised by reviewers. |
| **Compensation for Data Limitations:** Office Directors and senior leadership will discuss identified risks for further mitigation. |

| Performance Metric 2.4.3<br>Conduct NTSB Safety Summit |
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| **Strategic Goal 2:** Improve processes and products |
| **Strategic Objective 2.4:** Improve the effectiveness of agency processes and products |
| **Performance Target**: Three safety summits conducted |
| **Offices:** Agency (SRC Led) |
| **Definition**: This metric will gather stakeholder feedback on our advocacy efforts across all of the modes. We will use the feedback to potentially adjust our advocacy work, if the feedback warrants, which may include extending our reach to underserved communities. |
| **Standards:**<br>Green: All milestones have been established.<br>Yellow: At least 50 percent of milestones has been completed.<br>Red: Less than 50 percent of milestones has been completed. |
| **Milestones:**<br>Quarter 1 (December 31): Draft and deliver plan to Chair Completed<br>Quarter 2 (March 31): Finalize dates, produce an invite list for each summit with support of modal offices, and send invites for the first summit.<br>Quarter 3 (June 30): Host at least 2 safety summits.<br>Quarter 4 (September 30): Complete 3 safety summits; provide an attendee feedback report to the Chair. |
| **DATA VALIDATION AND VERIFICATION** |
| **Data Sources:** Stakeholder discussions; feedback form. |
| **Calculation:** Draft safety summit plan for approval; host summits; and provide analysis feedback. |
| **Validation/Verification Method:** Office Director or Deputy verification approval; final Chair review/approval. |
| **Data Limitations:** Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives), adequate personnel, or adequate time to address issues and risks raised by reviewers. |
| **Compensation for Data Limitations:** Office Directors and senior management will discuss identified risks for further mitigation. |

| Performance Metric 3.1.1<br>Establish Chief Human Capital Officer Hiring Strategy |
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| **Strategic Goal 3:** Optimize organizational effectiveness and efficiency |
| **Strategic Objective 3.1** Strengthen human capital planning |
| **Performance Target**: Strategy plan implemented, and recruitment efforts to hire a Chief Human Capital Officer started |
| **Offices:** Agency (AD/MD Led) |
| **Definition**:  As technological advances transform transportation products and services at an astonishing rate, it is critical that the agency remains aligned with changing transportation trends and ahead of transportation challenges. This environment has created the need for the NTSB to assess our current human capital planning processes to identify enhancements that will allow us to address staffing needs more strategically. Our future ability to adequately staff investigations, use rapidly advancing technology, and provide sufficient support services, relies on our ability to forecast workload, and determine the appropriate skills and number of employees needed to carry out our mission. Recruiting an experienced Chief Human Capital Officer (CHCO) to lead the creation of our human capital vision and align the agency's human resources policies and programs with the NTSB's mission, strategic goals, and performance outcomes is essential.<br><br>To meet these needs, the agency will develop a strategy to support the workforce planning needs of the agency and begin recruitment efforts to hire a CHCO. Possible strategies could include but are not limited to using OPM services, developing recommendations for hiring, and developing a hiring plan. These strategies will be used to start recruitment efforts to hire a CHCO as well as to develop strategic workforce and succession plans. |
| **Standards:**<br>Green: Strategy to support the workforce planning needs of the agency is approved; Recruitment efforts to hire a CHCO has started.<br>Yellow: C Strategy to support the workforce planning needs of the agency is completed and recruitment efforts to hire a CHCO has not started.<br>Red:  Strategy to support the workforce planning needs of the agency is not completed and recruitment efforts to hire a CHCO has not started. |
| **Milestones:**<br>Quarter 2 (March 31):  Strategy to address CHCO hiring and strategic workforce planning drafted.<br>Quarter 3 (June 30): Strategy submitted to the MD for review and approval.<br>Quarter 4 (September 30): Strategy implemented; recruitment efforts started to hire a CHCO. |
| **DATA VALIDATION AND VERIFICATION** |
| **Data Sources:** Agency data; FEVS Scores; Workforce plans; and other agency feedback. |
| **Calculation:** Research and evaluate agency data; FEVS scores; develop strategy to support the workforce planning needs of the agency for MD approval; implement strategies; start recruitment action to hire CHCO. |
| **Validation/Verification Method:** MD review or approval. |
| **Data Limitations:** Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives), adequate personnel, or adequate time to address issues and risks raised by reviewers, OPM and/or agency delays. |
| **Compensation for Data Limitations:** Office Directors and senior leadership will discuss identified risks for further mitigation. |

| Performance Metric 3.1.2 Create a Data System to Support the Tracking and Analysis of Staffing Levels and Hiring Actions |
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| **Strategic Goal 3:** Optimize organizational effectiveness and efficiency |
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| **Strategic Objective 3.1** Strengthen human capital planning |
| **Performance Target**: Visual dashboard developed |
| **Offices:** Agency (AD/MD/OCIO Led) |

**Definition**: As technological advances transform transportation products and services at an astonishing rate, we know it is critical that we remain aligned with changing trends. We must be able to rapidly hire the correct people to fill these positions.

We continue to assess our current human capital planning processes to identify enhancements that will allow us to improve the timeliness and quality of hiring actions. Our future ability to adequately staff investigations, keep pace with rapidly advancing technology, and provide sufficient support services relies on our ability to measure the performance of our current hiring process and improve upon it to hire the right people as quickly as possible.

This metric will create a dynamic dashboard to help us evaluate and support our tracking of hiring actions.

**Standards:**
Green: All milestones have been established.
Yellow: At least 50 percent of milestones has been completed.
Red: Less than 50 percent of milestones has been completed.

**Milestones:**
Quarter 1 (December 31): Establish SharePoint data collection site for hiring process steps.
Quarter 2 (March 31): Review and modify data collection site as needed for dashboarding.
Quarter 3 (June 30): In conjunction with CDO, stand up dashboard that permits tracking the progress of each external hiring action.
Quarter 4 (September 30): Visual dashboard developed. Build in the method to track hiring process time-to-complete to baseline time-to-complete and share site with Senior Leadership.

## DATA VALIDATION AND VERIFICATION

**Data Sources:** Hiring actions; staffing documentation

**Calculation:** Review current systems; evaluate procedures; develop dashboard project plan; test and pilot dashboard

**Validation/Verification Method:** Office Director or Deputy verification approval; final MD review or approval.

**Data Limitations:** Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives) data available adequate personnel, or adequate time to address issues and risks raised by reviewers.

**Compensation for Data Limitations:** Office Directors and senior leadership will discuss identified risks for further mitigation.

| **Performance Metric 3.1.3** |
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| **Establish Human Resources Customer Service Feedback Improvements** |

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| **Strategic Goal 3:** Optimize organizational effectiveness and efficiency |
| **Strategic Objective 3.1** Strengthen human capital planning |
| **Performance Target**: 2 improvements implemented |
| **Offices:** Agency (AD/MD Led) |
| **Definition**:  We will foster a culture of leadership, diversity, and accountability that enables forward-thinking decision-making while promoting teamwork, collaboration, and creativity within the agency. We are focused on empowering our multidisciplinary workforce through continuous improvement and innovation to achieve operational excellence and deliver quality results and products, and we have also developed strategies to ensure our resources are used effectively and efficiently.<br><br>Providing great customer service internally is key to our agency becoming more efficient and effective in our human capital planning.  To improve our customer service in human resources, we'll establish feedback improvement mechanisms to gather data and ensure consistency. |
| **Standards:**<br>Green: All milestones have been established.<br>Yellow: At least 50 percent of milestones has been completed.<br>Red: Less than 50 percent of milestones has been completed. |
| **Milestones:**<br>Quarter 2 (March 31): Evaluate hiring process issues & establish feedback mechanisms.<br>Quarter 3 (June 30): Analyze feedback data and implement improvements.<br>Quarter 4 (September 30): Improvements implemented. |
| **DATA VALIDATION AND VERIFICATION** |
| **Data Sources:** Human capital planning feedback survey or documentation |
| **Calculation:** Evaluate current issues; provide survey; analyze data; implement recommendations for improvement |
| **Validation/Verification Method:** Office Director or Deputy verification approval; final MD review or approval. |
| **Data Limitations:** Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives), adequate personnel, or adequate time to address issues and risks raised by reviewers. |
| **Compensation for Data Limitations:** Office Directors and senior management will discuss identified risks for further mitigation. |

| Performance Metric 3.3.1<br>Implement Strategic Career Development Roadmap |
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| **Strategic Goal 3:** Optimize organizational effectiveness and efficiency |
| **Strategic Objective 3.3** Develop model supervisors and leaders |
| **Performance Target**: Implement Strategic Career Development Roadmap |
| **Offices:** Agency (TC Led) |
| **Definition**: Within our workforce, we seek to develop future leaders by providing continuous learning and development opportunities. We will define and identify core competencies and training needs of our current leaders. In addition, we'll provide learning and development opportunities to meet future challenges, build capacity, and transfer knowledge through succession planning. We will develop a strategic talent management approach to enhance our current highly skilled knowledge-based organization, strengthening knowledge sharing and growth opportunities to increase our workforce's skills and competencies, especially in the increasingly complex transportation safety industry.<br><br>This metric allows the agency to begin the agile approach to develop future leaders at the agency. The metric will provide evaluation and analysis of current and external approaches to career development, as well as allow us to develop a strategic career development roadmap (roadmap) for employees. The roadmap provides training recommendations to staff when developing training requests.<br><br>In addition, the roadmap provides a list of training, certifications, webinars, and other resources available to staff. Each employee level has multiple recommendations for training, though this does not exclude employees from obtaining other training that may be available. The roadmap is divided by employee level and gives staff who wish to proceed to higher employee levels guidance on particular training available in establishing their roadmap to get to that level. |
| **Standards:**<br>Green: All milestones have been established.<br>Yellow: At least 50 percent of milestones has been completed.<br>Red: Less than 50 percent of milestones has been completed. |
| **Milestones:**<br>Quarter 1 (December 31): Conduct research, analysis, and provide recommendations for improvement to address the training needs of agency employees. Quarter 2 (March 31): Conduct listening sessions with leadership and staff to get feedback to determine the training needs of the agency.<br>Quarter 3 (June 30): Develop Career Development Roadmap to include NTSB training for employees at all levels of the organization -- executives, supervisors/managers, and staff for the MD's approval.<br>Quarter 4 (September 30): Roadmap implemented. |
| DATA VALIDATION AND VERIFICATION |
| **Data Sources:** Staff interviews; literature review; current and past programs; benchmarking; OPM guidelines. |
| **Calculation**: Evaluate career development programs and training;  implement roadmap |
| **Validation/Verification Method:** Office Director or Deputy verification approval; final MD review or approval. |

| Performance Metric 3.3.1 Implement Strategic Career Development Roadmap |
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| **Data Limitations:** Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives), subscription services available; training availability; adequate personnel, or adequate time to address issues and risks raised by reviewers. |
| **Compensation for Data Limitations:** Office Directors and senior leadership will discuss identified risks for further mitigation. |

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| **Performance Metric 3.4.1** <br> **Implement Diversity, Equity, Inclusion, and Accessibility Educational Training Series** |
| **Strategic Goal 3:** Optimize organizational effectiveness and efficiency |
| **Strategic Objective 3.4** Attract, develop, and retain a diverse and inclusive workforce |
| **Performance Target**: Three DEIA educational training series conducted |
| **Offices:** Agency (EEODI Led) |
| **Definition**:  On June 25, 2021, President Biden signed *Executive Order 14035, Diversity, Equity, Inclusion, and Accessibility in the Federal Workforce (Executive Order).* This Executive Order launched a whole-of-government initiative to cultivate a federal workforce that draws from the full diversity of the Nation and that advances equitable employment opportunities. <br><br> NTSB is committed to providing a diverse, equitable, inclusive, and accessible work environment. With the help of our Diversity and Inclusion Advisory Council (DIAC) NTSB has made great strides in promoting Diversity, Equity, Inclusion, and Accessibility (DEIA). <br><br> Under the Executive DEIA, topics are defined as follows: <br> • Diversity is the practice of including the many communities, identities, races, ethnicities, backgrounds, abilities, cultures, religions, and beliefs of the American people, including underserved communities. <br> • Equity is the consistent and systemic fair, just, and impartial treatment of all individuals, including individuals who belong to underserved communities that historically have been denied such treatment. <br> • Inclusion is the recognition, appreciation, and the use of the talents and skills of employees of all backgrounds and beliefs. <br> • Accessibility is the design, construction, development, and maintenance of facilities, information and communication technology, programs, and services so that all people, including people with disabilities, can fully and independently use them. <br><br> Staff will be trained on DEIA through a series of educational training courses that include each of the DEIA topics above and as reflected in the Chair's FY 2021 DEIA policy. EEODI will develop the series and provide training to staff. |
| **Standards:** <br> Green: All training courses have been conducted <br> Yellow: At least 2 training courses have been conducted <br> Red: At least 1 training course has been conducted |
| **Milestones:** <br> December 31: Establishing DEIA Training Educational Series. <br> April 30: At least 1 training course conducted. <br> June 30:  At least 2 training courses conducted. <br> September 30: 3 training courses have been conducted. |
| **DATA VALIDATION AND VERIFICATION** |
| **Data Sources:** Executive Order 14035; Chair's DEIA Policy; DIAC recommendations and results; EEODI attendance tracking data; Contractor barrier analysis data and recommendations; or any other data available. |
| **Calculation:** DEIA Educational Training series developed, and trainings conducted. |

| **Performance Metric 3.4.1** |
| **Implement Diversity, Equity, Inclusion, and Accessibility Educational Training Series** |
| **Validation/Verification Method:** Office Director or Deputy verification approval; final MD review or approval. |
| **Data Limitations:** Factors beyond our control, such as data availability, budgetary constraints (funding in support of activities or initiatives), adequate personnel or trainers, adequate time to address issues or any risks raised by reviewers. |
| **Compensation for Data Limitations:** Office Directors and senior leadership will discuss identified risks for further mitigation. |