

FY 25-26 Performance Measure Definitions

FY 2025 and FY 2026 Performance Measure 1.1.2.1 Implement advanced and emerging technology training	
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
Annual Performance Goal 1.1	Increase staff and senior leadership knowledge on advanced and emerging transportation programs and technologies that support operations and safety.
FY 2025 Performance Target:	One specialized training course completed by Modal Office Directors, Deputy Directors, and the Managing Director (MD).
FY 2026 Performance Target:	Finalize investigative staff automation training course.
Office Leads ¹	P: MD – Brian Curtis; S: MD – Dana Schulze; TMs: HCT - Johnny Mathis (2025); AS TM: AS – Joe Sedor (METI WG/2026)
PUBLIC/STAKEHOLDER BENEFIT	Ensure investigative staff are trained and equipped to handle accidents involving advanced and emerging transportation technologies. This will enable them to use these tools effectively, identify related safety issues, and recommend improvements—enhancing both investigative efficiency and overall transportation safety.
Definition:	<p>This measure tracks the participation of agency leadership in at least one specialized training course on advanced and emerging technologies. In this fiscal year, all Modal Office Directors, Deputy Directors, and the Managing Director (MD) are expected to complete one such course.</p> <p>The metric will rely on data from the METI Working Group (METI WG) recommendations, as well as from the Human Capital and Training (HCT) Career Development and Training (CDT) Division regarding available leadership training opportunities in emerging technologies.</p> <p>It is recommended that the SAE course "Autonomous Vehicles for Transportation Professionals", reviewed and audited by the METI WG, be designated as the primary training for Modal Office Directors, Deputy Directors, and the MD. However, other advanced or emerging technology courses completed by these individuals during the fiscal year may also be counted toward meeting this performance measure.</p>
FY 2025 Standards ² :	<p>Blue (Exceeded): All Modal Office Directors, Deputy Directors, and the Managing Director (MD) successfully complete one specialized training course on advanced or emerging technologies.</p> <p>Green (Met): A majority (more than 50%) of Modal Office Directors, Deputy Directors, and the MD complete one specialized training.</p> <p>Yellow (Partially Met): At least 50% of Modal Office Directors, Deputy Directors, or the MD complete one specialized training.</p> <p>Red (Not Met): Fewer than 50% of Modal Office Directors, Deputy Directors, and the MD completes one specialized training.</p>

¹ Primary (P); Secondary (S); Target Manager (TM)

² Red-Not Met, Significant issues or delays; Yellow-Potential issues that need monitoring; Green-On Track, no immediate issues, or risks; Blue-successfully completed.

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FY 2025 and FY 2026 Performance Measure 1.1.2.1 Implement advanced and emerging technology training	
<p>FY 2025 Milestones:</p> <p>Quarter 1 (December 31): No action required this quarter (N/A).</p> <p>Quarter 2 (March 31): METI Working Group (METI WG) Lead, Chief Data Officer (CDO), and the Career Development and Training (CDT) Division recommend the SAE course "Autonomous Vehicles for Transportation Professionals" as the designated training.</p> <p>Quarter 3 (June 30): Communication of training expectations to all Modal Office Directors, Deputy Directors, and the Managing Director (MD). Initial participation in the SAE course begins. Continued enrollment and participation in the SAE course or other approved advanced/emerging technology training. Mid-year progress review and tracking of completion rates.</p> <p>Quarter 4 (September 30): Final opportunity for remaining Directors, Deputies, and the MD to complete the required training. Data collection and reporting on overall completion to assess performance measure outcomes.</p>	
<p>FY 2026 Milestones:</p> <p>Quarter 1 (December): Release RFI and develop RFP</p> <p>Quarter 2 (March 31): Release RFP for investigative staff automation training.</p> <p>Quarter 3 (June 30): Award RFP and work with awardee on draft investigator training course.</p> <p>Quarter 4 (September 30): Finalize investigator automation training course.</p>	
<p>RESOURCES NEEDED TO ACHIEVE THIS PERFORMANCE MEASURE: funding, technology to deliver training; staff to audit the training as well as take the training; other agency's policies or procedures.</p>	
<p>DATA VALIDATION AND VERIFICATION</p>	
<p>Data Sources: METI WG recommendations; HCT CDT resources; or other agency documentation or sources deemed necessary for implementation. the SAE course, "Autonomous Vehicles for Transportation Professionals".</p>	
<p>Calculation: The number of Modal Office Directors, Deputy Directors, and the Managing Director (MD) who have completed the course is divided by the total number of individuals in those roles.</p>	
<p>Formula: (Number of Directors, Deputies, and MD who completed the course) ÷ (Total number of Directors, Deputies, and MD)</p>	
<p>Validation/Verification Method: Office director or Deputy director verification review and approval in PMA; senior leadership quarterly meetings and final MD review or approval. Coordination with SAE.</p>	
<p>LIMITATIONS AND CONSTRAINTS</p>	
<p>Possible challenges to meeting targets: Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives), investigation launch priority, executive orders, SAE data and reports, availability of training, timelines, Product Management Application (PMA) approvals, or adequate time to address issues and risks raised by reviewers.</p>	
<p>Compensation for challenges: Office directors and senior leadership will discuss identified risks for further mitigation.</p>	

FY 25-26 Performance Measure Definitions

FY 2025 and FY 2026 Performance Measure 2.1.1.2b Improve customer experience satisfaction	
Strategic Goal 2	Improve processes and products.
Strategic Objective 2.1	Improve enterprise data governance
Annual Performance Goal 2.1	Increase our safety influence by using enhanced data systems and expertise to improve external customer experience.
FY 2025 Performance Target	Implement two customer experience improvements on NTSB.gov
FY 2026 Performance Target	Conduct customer experience survey focusing on the effects of the improvements made based on FY 2024 feedback
Office Leads	P: SRC – Kathryn Catania; S: OCIO – Mike Anthony; TM: SRC – James Mathieson.
PUBLIC/STAKEHOLDER BENEFIT:	Engage transportation public by ensuring their experiences with data systems and public facing website are accessible and enjoyable.
Definition:	This measure tracks previously conducted customer satisfaction survey responses and provides an increase in results over the FY24 baseline.
<p>Under <i>Delivering a Digital-First Public Experience</i> (OMB M-23-22), issued 9/22/2023), OMB A-11, Part 6, S. 280, Managing Customer Experience and Improving Service Delivery and Executive Order 14058 ("EO 14058") on Transforming Federal Customer Experience and Service Delivery To Rebuild Trust in Government of December 13, 2021, and the 21st Century Integrated Digital Experience Act (Pub. L. 115-336)("21st Century IDEA"), all Executive agencies have a responsibility to manage customer experience and improve service delivery using leading practices and a human-centered approach.</p> <p>As defined by EO 14058, the term "customer experience" ("CX") means the public's perceptions of and overall satisfaction with interactions with an agency, product, or service. Factors of experience can include ease/simplicity/effort (burden/friction), efficiency/speed, transparency (e.g., participation, access), humanity (e.g., respect, dignity, empathy), effectiveness/perceived value of the service itself, and interactions with any employees. Perceived responsiveness to individual needs and ability to provide feedback is also important.</p> <p>Evaluate previous surveys to determine customer service satisfaction improvement over FY24 baseline results.</p>	
FY 2025 Standards:	<p>Blue: Successfully completed.</p> <p>Green: 2 improvements implemented.</p> <p>Yellow: Improvements identified; improvements implementation in process.</p> <p>Red: No improvements identified or implemented.</p>
FY 2026 Standards:	<p>Blue: Successfully completed.</p> <p>Green: Survey issued, developed report on user satisfaction.</p> <p>Yellow: Survey drafted pending OMB clearance.</p> <p>Red: No survey created or issued.</p>

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FY 2025 and FY 2026 Performance Measure 2.1.1.2b Improve customer experience satisfaction	
FY 2025 Milestones: Quarter 1 (December): N/A Quarter 2 (March 31): Review customer responses; Identify areas of improvement for website based on feedback and develop plan to implement changes. Quarter 3 (June 30): Begin implementing identified improvements Quarter 4 (September 30): Complete investigation page improvements.	
FY 2026 Milestones: Quarter 1 (December): Develop a new CX survey to gauge the usefulness of improvements. Quarter 2 (March 31): Obtain OMB approval for survey. Quarter 3 (June 30): Begin. Release and collect survey response. Quarter 4 (September 30): Report on the effect of investigation page improvements on users' customer satisfaction.	
RESOURCES NEEDED TO ACHIEVE THIS PERFORMANCE MEASURE: SRC, CIO or contracting resources to implement improvements.	
DATA VALIDATION AND VERIFICATION	
Data Sources: Previous agency surveys; web analytics	
Calculation: FY 25: Number of improvements identified by what process? FY26: Draft survey or feedback mechanism for OMB approval. Upon approval by OMB, launch survey or feedback mechanism to the public on NTSB.gov and all NTSB social platforms. Review feedback.	
Validation/Verification Method: Office director or Deputy director verification review.	
LIMITATIONS AND CONSTRAINTS	
Possible challenges to meeting targets: Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives), adequate personnel, executive orders, OMB timelines and approvals, response rates, or adequate time to address issues and risks raised by reviewers.	
Compensation for challenges: Office directors and senior leadership will discuss identified risks for further mitigation.	

FY 25-26 Performance Measure Definitions

FY 2025 and FY 2026 Performance Measure 2.1.4.1 Average age of open investigations	
Strategic Goal 2 Improve processes and products.	
Strategic Objective 2.1 Improve enterprise data governance	
Annual Performance Goal 2.1 Increase our safety influence by using enhanced data systems and expertise to improve external customer experience.	
FY 2025 Performance Target 365 days or less on average.	
FY 2026 Performance Target 350 days or less on average.	
Office Leads P: MD - Brian Curtis; S: MD - Dana Schulze; TM: Modal Directors	
PUBLIC/STAKEHOLDER BENEFIT: To ensure our open investigations are closed within a timely manner.	
Definition: This measure provides data on the average number of days of open investigations at the agency. The goal is to have an average of 365 days or less in FY 2025 and 350 days or less in FY 2026.	
FY 2025 Standards: Blue: Successfully completed. Green: Less than or equal to 365 days. Yellow: less than or equal to 366 days to 383 days Red: More than or equal to 384 days FY 2026 Standards: Blue: Successfully completed. Green: Less than or equal to 350 days. Yellow: less than or equal to 351 days to 368 days Red: More than or equal to 369 days	
FY 2025 and FY 2026 Milestones: Quarter 1 (December): N/A Quarter 2 (March 31): Modal offices query dashboard and present to senior leadership Update target as needed for midpoint. Quarter 3 (June 30): Modal offices query dashboard and present to senior leadership. Quarter 4: (September 30): Modal offices query dashboard and present to senior leadership average age of open investigations is 365 days or less.	
FY2026 Milestones Quarter 1 (December): Modal offices query dashboard and present to senior leadership. Quarter 2 (March 31): Modal offices query dashboard and present to senior leadership. Update target as needed for midpoint. Quarter 3 (June 30): Modal offices query dashboard and present to senior leadership. Quarter 4: (September 30): Modal offices query dashboard and present to senior leadership. The average age of open investigations is 350 days or less.	
Note that mid-year reviews should use year-over-year comparisons considering seasonal effects on the number of new investigations and age of open cases.	
RESOURCES NEEDED TO ACHIEVE THIS PERFORMANCE MEASURE: staff, funding, software updates; agency policies or procedures, or any other resources needed to achieve this measure.	
DATA VALIDATION AND VERIFICATION	
Data Sources: SAFTI; Mission Metric Dashboard; other data resources.	

FY 25-26 Performance Measure Definitions

FY 2025 and FY 2026 Performance Measure 2.1.4.1 Average age of open investigations
Calculation: Average age calculation is the mean number of days since the event date for all open, NTSB-led investigations resulting in a published report. Investigations are defined as closed based on the Board adopted date or published date for director delegated reports. The measure excludes investigation activities with no report, closeout memos, Marine Substantially Interested State investigations conducted with outside US waters and foreign Accredited Representative cases.
Validation/Verification Method: Office director or Deputy director verification approval; senior leadership quarterly meeting reviews, or final MD approval.
LIMITATIONS AND CONSTRAINTS
Possible challenges to meeting targets: Factors beyond our control, such as the complexity of the investigations, budgetary constraints (funding in support of activities or initiatives), executive orders, adequate personnel, timelines, data accessibility, PMA approvals, or adequate time to address issues and risks raised by reviewers. The average age of open investigations carries an additional, specific limitation associated with the seasonality of transportation accidents and crashes, particularly in aviation, with the greatest number of events occurring during the warmer summer months. A large increase in new investigations drives down the average age open cases, historically reaching annual lows during the early Fall then increasing to annual peaks in the late Winter while investigations are being completed, and there is less transportation activity and fewer accidents.
Compensation for challenges: Office directors and senior leadership will discuss identified risks for further mitigation.

FY 25-26 Performance Measure Definitions

FY 2025 and FY 2026 Performance Measure 2.1.4.2 Number of investigations over two years old	
Strategic Goal 2 Improve processes and products.	
Strategic Objective 2.1 Improve enterprise data governance	
Strategy 2.1.4 Reduce the age of open investigations to improve the timely release of facts, findings, and safety recommendations to the public.	
FY 2025 Performance Target: Aviation: 5 over two years; Surface Modes: 4 investigations over two years	
FY 2026 Performance Target: Zero surface investigations over two years old, and zero regional aviation investigations over 18 months	
Office Leads P: MD - Brian Curtis; S: MD - Dana Schulze; TM: Modal Directors	
PUBLIC/STAKEHOLDER BENEFIT: Provides transparency and responsiveness in completing investigations promptly allowing for conclusions to be reached in a reasonable time.	
Definition: This measure tracks the number of investigations over 2 years old by mode. The Mission metrics dashboard captures data on all investigations.	
FY 2025 Standards: Blue: Successfully completed. Green: Aviation: 5 investigations or less over two years old; Surface modes: 4 investigations or less over two years. Yellow: Aviation: 6-10 investigations over two years old; Surface modes: 5-9 investigations over two years. Red: Aviation: 11 or more investigations over two years old; Surface modes: 10 or more investigations over two years old.	
FY 2026 Standards: Blue: Successfully completed. Green: Regional aviation: zero investigations over 18 months; Surface modes: zero investigations over two years. Yellow: Regional aviation: 5 investigations 18 months; Surface modes: One to two investigations over two years. Red: Regional aviation: 6 or more investigations over 18 months; Surface modes: 3 or more investigations over two years old.	
FY 2025 Milestones: Quarter 1 (December): N/A Quarter 2 (March 31): Modal offices query dashboard and present to senior leadership. Update target as needed for midpoint. Quarter 3 (June 30): Modal offices query dashboard and present to senior leadership. Quarter 4: (September 30): Modal offices query dashboard and present to senior leadership Aviation: 5 investigations or less over two years old; Surface modes: 4 investigations or less over two years.	
FY 2026 Milestones: Quarter 1 (December): Modal offices query dashboard and present to senior leadership Quarter 2 (March 31): Modal offices query dashboard and present to senior leadership. Update target as needed for midpoint. Quarter 3 (June 30): Modal offices query dashboard and present to senior leadership Quarter 4: (September 30): Modal offices query dashboard and present to senior leadership Zero investigations over 2 years old (by mode).	

FY 25-26 Performance Measure Definitions

FY 2025 and FY 2026 Performance Measure 2.1.4.2 Number of investigations over two years old
RESOURCES NEEDED TO ACHIEVE THIS PERFORMANCE MEASURE: staff, funding, software updates; agency policies or procedures, or any other resources needed to achieve this measure.
DATA VALIDATION AND VERIFICATION
Data Sources: SAFTI; Mission Metric Dashboard; other data resources.
Calculation: Existing age calculations use days from event date, for all NTSB-led investigations resulting in a published report. Investigations are defined as closed based on the Board adopted date or published date for director delegated reports. The measure excludes investigation activities with no report, closeout memos, and foreign Accredited Representative cases.
Validation/Verification Method: Office director or Deputy director verification review and approval in PMA; senior leadership quarterly meetings and final MD review or approval.
LIMITATIONS AND CONSTRAINTS
Possible challenges to meeting targets: Factors beyond our control, such as the complexity of the investigation, budgetary constraints (funding in support of activities or initiatives), executive orders, adequate personnel, timelines, PMA approvals, or adequate time to address issues and risks raised by reviewers.
Compensation for challenges: Office directors and senior leadership will discuss identified risks for further mitigation.

FY 25-26 Performance Measure Definitions

FY 2025 Performance Measure 3.1.1.1 Implement an operational plan for returning to in-person work	
Strategic Goal 3	Optimize organizational effectiveness and efficiency.
Strategic Objective 3.1	Enhance the NTSB's culture to retain, attract, engage, and grow a highly skilled workforce.
Annual Performance Goal 3.1	Enhance the NTSB's culture to retain, attract, engage, and grow a highly skilled workforce.
FY 2025 Performance Target:	All teleworking staff return to the office by February 24, 2025.
Office Leads	P: MD - Dana Schulze; S: MD - Doline Hatchett and MD - Brian Curtis; TM: TBD
PUBLIC/STAKEHOLDER BENEFIT:	
Definition:	This measure will provide data and information on the January 20, 2025 Executive Order (EO), Return to In-person Work requiring all teleworking staff to return to in person work at designated duty locations by February 24, 2025.
FY 2025 Standards:	Blue: Successfully completed. Green: All non-exempt teleworking and remote staff return to the office.
FY 2025 Milestones:	Quarter 1 (December): N/A Quarter 2 (March 31): Respond to the Executive Order. Management Advisory sent out to staff regarding the EO. Operational plan developed to include the number of teleworking and remote employees. Teleworking or remote staff receive notifications from HCT Human Resources Division (HR); All non-exempt teleworking or remote staff return to the office by February 24, 2025. Quarter 3 (June 30): Employees update work schedule agreements. Quarter 4: (September 30): Successfully completed.
RESOURCES NEEDED TO ACHIEVE THIS PERFORMANCE MEASURE:	
EEO information. HR data on official duty stations and work schedules; MD resources to ensure compliance.	
DATA VALIDATION AND VERIFICATION	
Data Sources:	Executive Order; EEO, HCT, or MD resources including, but not limited to agency data, reports, policies, definitions, procedures; other agency data, reports, or policies.
Calculation:	Management Advisory goes out to staff outlining the return to in person work. HR provided teleworking and remote staff their duty status and return to in-person work email. All non-exempt staff report to in person work on February 24, 2025.
Validation/Verification Method:	Office director or Deputy director verification review and approval; senior leadership quarterly meetings and final MD review or approval.
LIMITATIONS AND CONSTRAINTS	
Possible challenges to meeting targets:	
Factors beyond our control, such as budgetary constraints (funding in support of activities or initiatives, executive orders, adequate personnel to attend events, availability of outreach events, travel costs outside the DC commuting area, contract resources, adequate personnel or trainers, timelines, PMA approvals, or adequate time to address issues and risks raised by reviewers.	
Compensation for challenges:	
Office directors and senior leadership will discuss identified risks for further mitigation.	

FY 25-26 Performance Measure Definitions

FY 2025 and FY 2026 Performance Measure 3.2.1.1b Percentage of launches evaluated for on-scene safety risks	
Strategic Goal 3	Optimize organizational effectiveness and efficiency.
Strategic Objective 3.2.	Engage, connect, and protect the workforce.
Annual Performance Goal 3.2	Enhance internal safety culture to reduce staff risk, injury, harm, and adverse health effects.
FY 2025 Performance Target	Fifty percent (50%) of total launches evaluated.
FY 2026 Performance Target	Seventy-five (75%) of total launches evaluated.
Office Leads	P: MD - Dana Schulze; S: MD - Brian Curtis; TM: Modal Offices
PUBLIC/STAKEHOLDER BENEFIT: Ensuring a safe environment for employees to work in provides both physical and social benefits for the workforce. Overall safety and wellness lead to better focus on the mission of making transportation safer for the traveling public.	
<p>Definition: Identifying hazards and risks at an accident scene is critical to staff safety. The ability to easily identify hazards, assign a level of risk and propose mitigation strategies and PPE will allow our investigators to do their work safely and more effectively. Investigators assessing their safety on scene to mitigate the potential hazards serve as the model for transportation operators. Providing an easy platform for investigators to conduct risk assessments will result in better focus on investigative work which leads to safer transportation for the traveling public.</p> <p>The application contains a library of possible hazards, examples of low, moderate, and high risk, along with mitigation strategies and personal protective equipment (PPE). This enables our investigators to quickly select all the relevant hazards and share with their supervisor and the team the plan for mitigation and what safety equipment is required. An updated risk assessment application which is standardized across all modes of transportation will also allow agency leadership and OSH staff to access data to determine trends, future safety needs, and potential opportunities for additional training or PPE. This is a multiyear project.</p> <p>The risk assessment application is available on a laptop, mobile device, or tablet and can be used when out of cell service coverage. It allows staff and supervisors to document hazards, risks and mitigation and provide approvals when needed.</p>	
<p>FY 2025 Standards:</p> <p>Blue: Successfully completed.</p> <p>Green: 50 percent of launches evaluated.</p> <p>Yellow: At least 25 percent of launches evaluated.</p> <p>Red: Fewer than 25 percent of launches evaluated.</p>	
<p>FY 2026 Standards:</p> <p>Blue: Successfully completed.</p> <p>Green: 75 percent of launches evaluated.</p> <p>Yellow: At least 50 percent of launches evaluated.</p> <p>Red: Fewer than 50 percent of launches evaluated.</p>	

FY 25-26 Performance Measure Definitions

FY 2025 and FY 2026 Performance Measure 3.2.1.1b Percentage of launches evaluated for on-scene safety risks	
FY 2025 Milestones: Quarter 1 (December): N/A Quarter 2 (March 31): RPH is implementing the application for all launches. HS application has been built and has started testing. Quarter 3 (June 30): MS application is built and has started testing. Quarter 4: (September 30): All modes using tool for 100% launches. Fifty percent (50%) of launches evaluated.	
FY 2026 Milestones: Quarter 1 (December): Launches evaluated. Quarter 2 (March 31): Launches evaluated. Quarter 3 (June 30): Launches evaluated. Quarter 4: (September 30): Seventy-five percent (75%) of launches evaluated.	
RESOURCES NEEDED TO ACHIEVE THIS PERFORMANCE MEASURE: staff time, OCIO support and continued support of application vendor and OCIO technology funds for additional modal offices	
DATA VALIDATION AND VERIFICATION	
Data Sources: risk assessment application and aviation safety investigations from pilot; other surface modes investigations; other agency resources.	
Calculation: 100% of launchable regional aviation accidents during the FY use the application	
Validation/Verification Method: Data from the application verified by Safety Chief and relevant Modal Director.	
LIMITATIONS AND CONSTRAINTS	
Possible challenges to meeting targets: Factors beyond our control, such as adequate personnel to build and implement the application availability of funds for vendor; executive orders, timelines, PMA approvals, or adequate time to address issues and risk raised by reviewers.	
Compensation for challenges: Office directors and senior leadership will discuss identified risks for further mitigation.	