



DIVERSITY & INCLUSION AT HHS

“Bringing Together a Diverse, High-Performing Workforce”

Summer 2014 ISSUE

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Your feedback is always welcome. If you would like to share comments and ideas regarding this newsletter, or if you would like to collaborate, please contact Duilio Correa, Editor-in-Chief, Diversity and Inclusion Division, at: Duilio.correa@hhs.gov. For more information about the Diversity and Inclusion (D&I) Division, please visit: www.hhs.gov/asa/ohr/spd/di.html.

Special Emphasis Events

By Len Gerald, Diversity Program Manager, D&I Division, HHS



Welcome to the Summer 2014 Issue of Diversity and Inclusion at HHS; a quarterly newsletter that showcases efforts to promote diversity and inclusion (D&I) across the U.S. Department of Health and Human Services (HHS). Special Emphasis Events in this Issue, include:

Lesbian, Gay, Bisexual, and Transgender (LGBT) Pride Month

In June 2014, a number of activities took place throughout the Department in observance of LGBT Pride Month – a commencement period to recognize the impact of LGBT individuals in society. HHS Operating Divisions (OpDivs) hosted numerous events that featured renowned speakers who discussed the advancement of LGBT equality, healthcare policies, and related current and future initiatives. There were also LGBT awareness training sessions and social gatherings, such as film screenings, the federal-wide Rooftop PRIDE Mixer, and the 20th anniversary of the Gay, Lesbian, Bisexual, and Transgender

Employees of the Federal Government (GLOBE), at the Centers for Disease Control and Prevention (CDC). Please turn to page four to read more about the 2014 Pride Month Celebration at HHS. A special thanks to Sonya Keeve and her tremendous efforts that made this event possible.

50th Anniversary of the Civil Rights Act

On April 22, 2014, the HHS Office of Civil Rights (OCR), in collaboration with the Office of Minority Health (OMH) and the HHS Diversity and Inclusion (D&I) Division, hosted a memorable event to commemorate the 50th Anniversary of the Civil Rights Act. The theme of the event was *Delivering on the Promise of Healthy Equity*, which featured a panel of experts that shared views on topics such as historical perspectives on racial segregation, discrimination in health care and current efforts to eliminate disparities. Those in attendance, both onsite and via teleconference were able to participate in interactive Q&A segments. For more information, visit the [HHS OCR website](#).

Cinco de Mayo Commemoration

On May 6, 2014, the Hispanic Employment Organization (HEO) hosted the HHS Cinco de Mayo Commemoration. Some of the distinguished guest speakers included former HHS Secretary Kathleen Sebelius and key administration officials. This was a valuable opportunity to celebrate the heritage of the Hispanic community and discuss cultural competency and language access as it relates to the implementation of HHS programs. Please contact Gina Rodriguez at Gina.Rodriguez@hhs.gov to request information about HEO initiatives.

Hispanic Heritage Month

HHS, along with other federal agencies and organizations across the country, will formally recognize the legacy and contributions of Hispanics and Latinos, in celebration of the annual Hispanic Heritage Month (September 15 – October 15). As established by the National Council of Hispanic Employment Program Managers (NCHEPM), the theme for the 2014 Hispanic Heritage Month is: *Hispanics: A legacy of history, a present of action,*

and a future of success. The observation of this celebratory month started in 1968, as Hispanic Heritage Week under President Lyndon Johnson and was enacted into law on August 17, 1988, on the approval of Public Law 100-402. Please stay tuned for details on the event(s) that HHS will host to commemorate Hispanic Heritage Month.

Disability Employment Awareness Month Held each October, National Disability Employment Awareness Month is a national campaign that raises awareness about disability employment issues and celebrates the many and diverse contributions of America's workers with disabilities. During the year 1945, Congress enacted a law declaring the first week in October *National Employ the Physically Handicapped Week*. In 1962, the word "physically" was removed to acknowledge the employment needs and contributions of individuals with all types of disabilities. In 1988, Congress expanded the week to a month and changed the name to *National Disability Employment Awareness Month*. Please join us on Tuesday, October 28, 2014 at 1:00 PM (EDT) in the Great Hall of the Hubert H. Humphrey Building, as we celebrate the immeasurable value of disabled individuals to our workforce.

For more information, contact Len Gerald, Diversity Program Manager, at: Len.Gerald@hhs.gov.

Staff Picks

- Learn more about [Culture and its Effect on Communication](#) .
- **Emotional Intelligence for Managing Results in a Diverse World: The Hard Truth About Soft Skills in the Workplace** (ISBN: 9780891062554).
- [The NIH Catalyst Newsletter](#)  showcases scientific research and contains feature stories, essays, breaking news on NIH research, profiles, and information about Scientific Interest Groups, as well as articles on diversity and inclusion programs, and much more.

Director's Corner

By Wilfredo Sauri, Director, D&I Division, HHS



Employee retention is vital to the success of any organization, and the HHS Diversity and Inclusion (D&I) Division recognizes this fact. Nevertheless, a successful employee retention program goes beyond the development and implementation of strategies. It also involves fostering a productive and safe working environment where positive and motivated staff can reach their full potential. In this issue, I will talk about core values, employee engagement groups, and data analytics and reporting, in terms of successful retention strategies.

Core values – the essence of an organization, shape organizational culture, influence employee behavior, contribute to an organization's success, and are effective retention tools. The Start with Yes! Diversity and Inclusion Initiatives have adapted the ["I CARE" Core Values](#) which emphasize Innovation, Commitment, Accountability, Respect, and Excellence. Modeling "I CARE" will help us enhance internal and external outreach efforts to increase not only applicant flow and hiring, but also retention of positive and motivated staff. This is also an excellent opportunity for employees across the Department to become actively engaged in such initiatives.

Employee engagement groups provide a safe forum to share ideas and best practices. It is

important to recognize that, in an organization, everyone's opinion is important and promoting open communication and interaction among employees is a key element to enhancing working conditions and retaining positive and motivated employees. The HHS Employee Engagement Team (HEET) is a voluntary HHS employee group that regularly meets and works together to help improve employee engagement across the Department. HHS employees, of all grades and positions are welcome to join the team.

HEET members also come together in engagement-related workshops about focus group facilitation, Employee Viewpoint Survey (EVS) data analysis, culture change, diversity and inclusion, and performance capacity development. Contact Lesley Cothran, Lesley.Cothran@hhs.gov, or James Egbert, James.Egbert@hhs.gov, HEET co-leads, for more information.

Data analytics provides the means to accurately make quantitative assessments of retention strategies. This includes collecting and analyzing data from surveys to gain a better understanding of how employees feel about working conditions, trainings, and professional development. It is also essential to discuss results with stakeholders. For instance, on June 19, 2014, the Veterans Employment Programs Team, within the Office of the Secretary (OS), hosted a veteran chat session to discuss with veterans the results of the Veteran Retention Survey. In this session, titled "What Would it Take to Keep You at HHS?" veterans provided meaningful feedback that will assist in the development, implementation, and management of successful retention strategies.

Stay tuned for the next issue of the newsletter which will cover National Hispanic Heritage Month and Disability Awareness Employment Month.

2014 Pride Month Celebration at HHS

By Linda Amendt, Biologist, FDA

The U.S. Department of Health and Human Services (HHS) and the HHS Lesbian, Gay, Bisexual, and Transgender (LGBT) Employee Resource Groups (ERGs) presented the 2014 Pride Month Celebration: *Build Our Bright Future*. WOW! We have not seen a PRIDE program like this in quite a while! Indeed, it was the perfect occasion to recognize the wonderful pride and tremendous perseverance of the LGBT community to continuously forge a more diverse and inclusive society.

June is the month when we come together in various celebratory venues to remember with PRIDE, the turning of the tide of LGBT events in demonstrations by members of the gay community against a police raid that took place in the early morning hours of June 28, 1969, at the Stonewall Inn in the Greenwich Village neighborhood of New York City. Fast forward 44 years, and we have an openly lesbian U.S. Senator invited to speak at the Department.

Opening remarks were made by Perry Rhew, Department of Homeland Security, Pride co-founder, who shared his life and professional experiences as a gay man to audiences both present at the Great Hall and watching live via HHS.gov. Newly appointed HHS Secretary Sylvia Mathews-Burwell, joined us and gave an excellent rendition of her warm welcome by everyone at the Department. Secretary Burwell then introduced the keynote speaker, U.S. Senator Tammy Baldwin, (D) Wisconsin – champion of LGBT equality nationally and abroad.

While serving in the House, then, Congresswoman Baldwin, helped lead the successful effort to enact the Matthew Shepard Hate Crimes Act, repeal the *Don't Ask, Don't Tell* policy, and be the lead voice championing the fully inclusive Employment Non-Discrimination Act (ENDA). Senator Baldwin serves on a number of committees, and is committed to

continuing her quest for fairness and for working across party lines to strengthen the essential pillars of economic security for Wisconsin's people in need of assistance.



Senator Baldwin exercised her knowledge and insight on the significant advances that the LGBT community has made in the past decade. Besides the rescission of *Don't Ask-Don't Tell*, and the landmark decision in *United States v. Windsor*, the Affordable Care Act provides much needed coverage to millions of Americans, while addressing LGBT health disparities. A well-respected politician, Senator Baldwin, spoke gallantly before the audience, and left a memorable mark that will not be forgotten for years to come.

This year's celebration also reflected and honored HHS's commitment for creating a rich, diverse workplace in a wholly inclusive environment. Needless to say, the celebration was felt with real PRIDE. I am PROUD of HHS, and PROUD to work here!

Please visit the [HHS LGBT Health and Well-being website](#) for more information on LGBT-related programs, initiatives, and other resources at the Department.

Welcoming People Who Are Deaf or Hard of Hearing to Research at NIH

By Geri Piazza, Writer/Editor, National Institute of Dental and Craniofacial Research/NIH

Leaders lead by example. They are people others want to follow. At least two senior investigators at the National Institutes of Health (NIH) are providing a good example to other hiring managers by offering opportunities in their research labs for staff who are deaf or hard of hearing.

In 2013, Peter M. Blumberg, Ph.D., chief of the Molecular Mechanisms of Tumor Promotion Section at NIH, won the Ruth Kirschstein Diversity in Science Award for having recruited and trained 15 students who are deaf and hard of hearing since 1998. The award is given to scientists who show a strong commitment to mentoring and encouraging underrepresented minorities to enter the sciences. For day-to-day communication within his lab and for events, he arranges for sign language interpreters. In addition, Blumberg taught himself sign language and encourages his hearing staff to learn how to sign also.

Last year on the NIH campus, another senior investigator and section chief embraced an opportunity to work with a college graduate who is deaf. Although Marian F. Young, Ph.D., chief of the Molecular Biology of Teeth and Bones Section at NIH, gets many requests each year from students to intern in her lab, last year was the first time that a person who is deaf reached out to her. Andrew Donald had the right academic background and a keen interest in her research area, so she granted him an interview. They met in her molecular biology lab without first arranging for a sign language interpreter. Although she'd been on the NIH campus since the 1980s, Young admitted that she had no idea how to arrange for an interpreter.

When Donald showed up for the interview, he sat next to Young and they took turns texting on a laptop that was between them. Donald impressed Young with his confidence, intelligence, and

passion, and soon thereafter he obtained funding from an NIH post-baccalaureate Intramural Research Training Award, as well as funding from the NIH Academy, which educates Fellows about health disparities.

After Donald became a member of the lab, he figured out how to arrange for interpreters. Dozens of interpreters work on the NIH campus, and two interpreters work as a team when Donald takes part in lab meetings or scientific seminars. When one interpreter pauses or stumbles over a technical term, the other interpreter seamlessly continues the signs for Donald. Although he can request an interpreter any time he needs one, Young purchased an iPad shortly after Donald joined her group. The easily transportable iPad facilitates day-to-day communication and eliminates the need for notepads or a full-time interpreter.



Are you interested in interviewing a recent college grad who has a disability? HHS hiring officials can access a searchable database of qualified college students and recent graduates with disabilities at the [Workforce Recruitment Program's \(WRP\) website](#) .

Sign Language Interpreters: Qualified or Certified?

By Crystal Williams, OHR Staff Sign Language Interpreter/Site Coordinator, D&I Division, HHS



Last winter, the world paid homage at the memorial service of Nelson Mandela, former president of South Africa. What began as a joyous occasion became renowned world-wide for a scandal regarding the qualifications of the sign language interpreter. Why wasn't he qualified? How was he able to get that close to the President of the United States? Deaf, hard-of-hearing, and interpreting communities abroad wanted answers to these questions and more.

In the United States, there are sign language interpreter training programs, state quality assurance screenings, and national certification boards who work to ensure that the professional sign language interpreter is both qualified and certified (nationally-approved). In the federal government, position descriptions are created and onsite screenings are conducted to help ensure that the best interpreting services are provided as reasonable accommodations. Still, for the manager or employee who is unfamiliar with the interpreting process and/or sign language, ensuring the services of a qualified interpreter may require a little more assistance.

What is a Qualified Interpreter?

Title II of the Americans with Disabilities Act defines a qualified sign language interpreter as *"an interpreter who is able to interpret effectively, accurately and impartially both receptively and expressively, using any necessary specialized*

vocabulary." In plain language, this means:

1. The interpreter produces sign language with fluency and has a strong command of the spoken language, including specialized vocabulary or jargon;
2. The interpreter has a strong visual understanding of the signed message communicated by an individual who is deaf or hard-of-hearing;
3. The interpreter accurately conveys the intended meaning, content, and context of a spoken or signed message; and
4. The interpreter does not interject or allow personal opinion to influence his/her interpretation.

Five Helpful Tips on Employing a Qualified Interpreter

1. Consult a sign language/interpreting expert, i.e. your agency's staff sign language interpreter, coordinator, or reasonable accommodations specialist.
2. Consult with a deaf/hard-of-hearing employee to obtain a list of reputable sign language interpreters or interpreting agencies.
3. Request services from a sign language interpreter who has knowledge of the specialized jargon to be used in the communication setting, e.g. an IT meeting.
4. "If it's not broke, don't fix it." - Build a relationship with an interpreting professional who has provided proven and quality interpreting services to your agency.
5. "You get what you pay for." - In the midst of budget constraints federal-wide, sometimes securing the least expensive services may result in poor quality of the interpreting services.

To obtain more information, or to partner with *PAH! for Health*, please contact Crystal Williams, at: Crystal.Williams@hhs.gov, or by phone at: (202) 690-8330 (Voice)/(202) 540-8261 (VP).

The OPM Shared List of People with Disabilities

JOB OCCUPATIONS

IN SCOPE

*Accountant
Budget Analyst
Contract Representative/Specialist
Financial Management Analyst
HR Assistant/Specialist
Information Technology Specialist
Miscellaneous Clerk Secretary*

OTHER JOB OCCUPATIONS

*Attorney/Lawyer
Biologist
Case Examiner
Customer Service Representative
Data Analyst
EEO Specialist
Engineer Environmental Scientist
Language Analyst
Medical Technologist
Nurse Policy Analyst
Program Analyst and Specialist
Tax Examiner
And More...*

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What is the OPM Shared List of People with Disabilities?

It is a database of candidates with disabilities, who are Schedule A eligible, provided by OPM for federal human resources and hiring managers in order to assist in the recruitment of people with disabilities. Prior to inclusion in the Shared List, candidates proceed through a skills, education, professionalism, and work ethics screening process.

How do I access resumes in the Shared List?

The OPM Shared List of People with Disabilities is hosted online on the MAX Federal Community. To access the Shared List, follow the steps below:

Step 1: Register at <https://max.omb.gov/maxportal/>, and complete the short registration form.

Step 2: Once registration is complete, login, and click “Go to MAX Federal Community.”

Step 3: Inside the Community, type “OPM Shared List” in the search tool (upper right-hand corner), and click on “OPM Shared List of People with Disabilities (Home).”

Step 4: Using the search tool, resumes may be filtered by job occupation, location, veteran status, clearance, education, and more.

What if my agency has specialized recruitment requests?

Agencies interested in using Bender Consulting Services to recruit and screen candidates should contact Mary Brougher to discuss how we can best meet their specific recruitment needs.

How does a person with a disability apply in the shared list?

To apply for consideration, applicants should submit a resume electronically to resume@benderconsult.com. Please write “FEDERAL CAREER OPPORTUNITIES” in the subject line. Further information about Bender’s recruitment and screening processes can be found at www.benderconsult.com.

Who is Bender Consulting Services?

Headquartered in Pittsburgh, PA, Bender Consulting Services recruits and hires people with disabilities on a national basis for professional employment opportunities in the public and private sectors.

FAPAC and HHS Expand Leadership Training

By Vane Komolprasert, Constitution and Bylaws Chair, Federal Asian Pacific American Council, FDA

On May 5-8, 2014, the Federal Asian Pacific American Council (FAPAC) hosted the 29th National Leadership Training Program (NTP) at the Sheraton Charlotte Hotel, Charlotte, North Carolina. The theme for the event was *Diverse leadership + Expanding opportunity = An Imperative for America*. On day one of the NTP, HHS held an Agency Forum to celebrate the Asian American and Pacific Islanders' (AAPI) Heritage Month Observance.

The Forum featured a keynote on "Principles of Leadership" by Mr. Ned Holland, HHS Assistant Secretary for Administration, a presentation on "State of AAPI at HHS" by Mr. Wilfredo Sauri, Director, HHS Diversity and Inclusion Division, and highlights of the Agency Plan on "Advancing Asian American, Native Hawaiian, and Pacific Islander Health, and Affordable Care Act," by Dr. J. Nadine Gracia, Deputy Assistant Secretary for Minority Health, Director, Office of Minority Health.



The Agency Plan is prepared in accordance with the Executive Order 13515, signed by President Obama on October 14, 2009, which requires each agency to prepare and submit for approval, a written implementation plan to increase participation and access to federal programs and services for underserved Asian Americans and Pacific Islanders.

The forum was remotely broadcast via Adobe Connect to many HHS employees who took the

opportunity to learn about the HHS emphasis on eliminating health disparities among underserved communities.



The one-day leadership training workshop was open for anyone who was interested in becoming a leader at any level. FAPAC encourages federal employees to continue education which would help them improve their job performance, rendering them an opportunity to advance in the workplace.

Dr. Kin Wong, FAPAC President, presented a plaque of appreciation of the HHS partnership in promoting the FAPAC mission. Through continued partnership with HHS, more than 200 federal employees attended a series of three one-day leadership training workshops that were offered by FAPAC on November 1, 2013, March 7, 2014, and June, 6 2014.

FAPAC is a non-profit, non-partisan organization representing the interests of over 163,000 Asian Pacific American federal and DC employees. FAPAC's mission is to promote equal employment opportunity (EEO) and cultural diversity within the federal and DC governments through education and recognition of outstanding performance. More information about membership, activities, and events is available at the FAPAC [website](#).

Hispanic Employment Program - Updates

By Crystal Williams and Omonn James-Davis, Hispanic Employment Program Managers, D&I Division, HHS

HEPSP Quarterly Focus

With the recent approval of the 2014-2020 HHS Hispanic Employment Program Strategic Plan (HEPSP), the D&I Hispanic Employment Program (HEP) Team's approach to implementing the Plan will involve a quarterly focus on specific objectives. The focus for this quarter – Q3/FY14 – is Objective 1.3: *Assess and eliminate any systemic barriers in the effective recruitment and consideration of Hispanics.* In addressing this particular objective, the HEP Team seeks to develop strategies to broaden the area of consideration to include applicants from all appropriate sources.

Some of the strategies that are currently underway to accomplish this objective include: (1) supporting recruitment professionals within HHS's 10 regions, (2) leveraging Applicant Flow Data to identify trends and barriers associated with Hispanic recruitment, (3) partnering with the D&I Veterans and Disability Employment Program Managers to maximize use of Veterans Preference and Schedule A hiring authorities, and (4) circumventing budget constraints experienced by the Office of Human Resources (OHR) through partnership with our fellow OpDiv Hispanic Employment Program Managers (HEPMs) on recruitment efforts and events.

Weekly Job Announcements to Listserv Networks

During Q2/FY14, the HEP Team began distributing HHS job announcements to various point-of-contacts across the country. Furthermore, the HEP Team compiled a robust listserv, comprising of nearly 200 contacts, representing various Hispanic Serving Institutions (HSIs), national Hispanic Serving Organizations, program managers, and stakeholders. In an attempt to track the effectiveness of the announcements, the HEP Team also produced a database to capture any direct correspondence received in response to our distributions. The HEP Team is confident that these

outreach efforts will help to increase the number of Hispanic/Latino job seekers who are interested in applying to HHS job vacancies.



HHS Hosts the NCHEPM

On February 19, 2014, the HEP Team had the pleasure of hosting the monthly meeting for the National Council of Hispanic Employment Program Managers (NCHEPM). Each month, a different federal agency is selected to host and to present a topic of interest, with HHS chosen as the highlighted agency for the month of February. The February meeting was extremely productive and featured our very own Wilfredo Sauri, Director, HHS Diversity & Inclusion Division, as the keynote presenter. Mr. Sauri's presentation provided strategic insight into the data collection process and how it may be used to monitor the progress and challenges of Hispanic employment. Some of the key topics addressed within the presentation included:

1. Hires and Separations Data
2. Applicant Flow Data
3. Hispanic Council on Federal Employment (HCFE) – Retention Group

The NCHEPM is a body consisting of an executive board and membership from multiple federal agencies and other organizations from across the United States. Most members have been appointed as their agencies designee responsible for building relationships between federal agencies and the Hispanic community.

For more information about the HHS HEP, please contact Crystal Williams at Crystal.Williams@hhs.gov, or Omonn James-Davis at Omonn.James-Davis@hhs.gov.

From Active Duty to Analytics: Mary's Journey to the Department

By Mary Billingsley, Management Analyst, Data Analytics and Reporting, D&I Division, HHS



My name is Mary Billingsley and I am a management analyst with the HHS Diversity and Inclusion (D&I) Division's Data Analytics and Reporting (DAR) team. Previously, I was on active duty service in the United States Marine Corps and later worked for various defense contractors. The military not only afforded me the opportunity to travel and serve our nation, but to also enhance my skills and professional growth. This solid combination of life and professional experience made me a very strong candidate to work at the HHS D&I Division.

Based on my experiences as a military veteran, a former contractor, and federal employee, I can firmly conclude that a diverse workplace is a critical element of a successful organization. In the Marine Corps, we have a saying: "You are only as strong as your weakest link;" therefore, it is imperative that all team members reach their highest potential in professional development to provide outstanding service and fulfill their roles within an organization.

Since joining the DAR team last year, I find it amazing how the numbers tell the overall story of

the Department's workforce history; one of my main responsibilities is producing the Quarterly Consolidated Disability, Diversity, and Veterans Progress Reports. These reports tell the story of employee hiring and separation at HHS, and serve as tools to improve recruitment and retention at the Department. Additionally, I assist with the preparation of the annual Management Directive 715 Report (MD-715), which the Equal Employment Opportunity Commission (EEOC) uses to ensure that policy standards, developed to establish and maintain effective EEO programs, are met by all federal agencies.

Much of my day-to-day activities and responsibilities include preparing ad hoc reports for a number of internal branches and organizations within HHS. Our team is committed to providing the highest level of customer service and strives to put forth unparalleled effort, and contribute to the decision-making process and development of effective programs and policies.

Furthermore, many of these reports require the use of personally identifiable information (PII) in order to provide concise and informative data. Basically, PII is information that can be used to distinguish or identify an individual. There are federal laws in place to protect such information [**References: Privacy Act of 1974, as amended and OMB Memo M-07-16 (May 22, 2007)**]. The DAR team recognizes and adheres to these policies and regulations.

I have learned that in order to produce high quality services and surpass our customers' expectations, I must work efficiently and effectively with my team members. Working at HHS has been a joy, and I look forward to continue to serve in one of our nation's top federal agencies.

Information, Resources, and Research about Disability Issues

By Marilyn James, Diversity Specialist, D&I Division, HHS

CAP: Reducing Barriers for Workers with Disabilities

In order to eliminate employment barriers for people with disabilities, in 1990 the U.S. Department of Defense (DoD) established the Computer/Electronic Accommodations Program (CAP). Since its inception, CAP's mission is to provide assistive technology and accommodations to ensure people with disabilities have equal access to information and opportunities throughout the federal government.

Presently, CAP has expanded beyond the DoD to partner with HHS and other federal agencies, making it the largest provider of reasonable accommodations in the world. The program's vision is to increase employment of people with disabilities by ensuring that they have access to accommodations. CAP does this by paying for and providing a wide variety of assistive technology for people with hearing, visual, dexterity, cognitive, and communication disabilities.

While CAP mainly focuses on purchasing assistive technology for employees with disabilities, it also supports federal employees throughout the employment lifecycle, including coming to work, staying at work, and returning to work, to help ensure the federal government is the model employer of people with disabilities. Frequently requested accommodation solutions include videophones, personal amplification devices, screen magnification software, screen readers, cueing/memory aids, literacy software, alternative keyboards, pointing devices, and speech recognition software.

The process for customers to identify and request accommodations from CAP is simple; customers

that already know what accommodations they need can request them through the online request form available at www.cap.mil. For customers that need assistance in identifying solutions, there are a number of options available. The CAP Technology Evaluation Center (CAPTEC), at the Pentagon, contains several computer workstations equipped with a wide variety of assistive technology designed to accommodate people with disabilities. CAPTEC also conducts in-person, phone, and video teleconferencing needs assessments. Once solutions have been identified, requests can then be completed through the same online request form.

CAP also offers a number of online tools, including assistive technology videos and a series of online training modules to help federal employers understand how simple and beneficial hiring employees with disabilities can be.

The partnership between CAP and HHS establishes an integrated approach to removing barriers with assistive technology while promoting diverse abilities. For additional information on CAP and their online tools, contact Marilyn James by e-mail at Marilyn.James@hhs.gov or at (240) 242-5716.

Additional Resources

Journal Article: Bruyere, S. M., Erickson, W. E., & Van Looy, S. (2005). Information Technology and the Workplace: Implications for Persons with Disabilities. *Disability Studies Quarterly*, The Society for Disability Studies, Vol 25, No 2. [Web link](#).

Virtual Online Training: HHS University Learning Management System (LMS). Course Title and ID: HHS Section 508 Training-Phase I; 00009629.

CDC Diversity Culture Audit Results

By Division of Diversity and Inclusion Management Team, CDC

The results of the first-ever Diversity Culture Audit conducted at the Centers for Disease Control and Prevention (CDC) reveal that employees take pride in working for CDC and that their personal goals align with the agency's mission. According to survey and focus group results, however, some leaders and employees expressed concern that CDC's culture is slow to change and is not perceived as consistently encouraging diversity of thought.

The audit was conducted from June through September 2012, and consisted of an online survey, 20 focus group sessions, and 20 one-hour interviews with senior leaders. It examined CDC employees' assumptions, norms, values, and practices regarding diversity and inclusion to find out to what extent they hinder or support CDC's mission. CDC partnered with the consulting firm, Global Novations, to conduct the audit, which focused on three areas: business, people, and culture.

"This is the first time we've had an opportunity to say who we are as a community, what we value, and whether we are living what we say," said James Nelson, PhD, CDC's Chief Diversity Officer. The audit also revealed there is a consensus that an increased focus on diversity and inclusion will positively impact CDC's strategic goals, and that a key to success is visible leadership commitment to these principles.

The culture audit was conducted as part of CDC's Diversity Plan 2011-2015, which is considered a "living road map" to guide efforts in making CDC an employer of choice. The Plan supports CDC's Winnable Battles and the achievement of CDC strategic priorities by creating and sustaining a multi-talented, diverse workforce that thrives on creativity, innovation, and excellence.

The report identified several areas where both senior leaders and managers can support diversity efforts. For example, the report suggested that senior leaders could define the responsibilities of directors, managers, and supervisors in supporting diversity and inclusion, and set expectations for accountability. The report also suggested that senior leaders work with human resources to refine processes and to set realistic goals for talent recognition and development as well as recruitment and retention.

Report's Recommendations:

What senior leaders can do

- Reinforce the link between diversity and inclusion and CDC's strategic priorities first, then to the work of each Center, Institute, and Office ;
- Define the responsibilities of directors, managers, and supervisors, and set expectations for accountability;
- Put into action the agency-wide diversity and inclusion communications plan;
- Work with human resources to refine processes and to set realistic goals for talent recognition and development as well as recruitment and retention;
- Conduct exit interviews and use the Equal Employment Opportunity (EEO) barrier analysis to understand the "why" in terms of unintended attrition;
- Commit to zero tolerance for harassment and bullying, regardless of level/title;
- Repeat the audit every two years to get a pulse-check;
- Provide needed diversity and inclusion training;
- Study and act on individual CIO reports; have model CIOs share best practices. See the problem areas clearly and take definitive action.

What managers can do

- Be objective and fair in your hiring and promotion decisions;
- Have your team identify how “diversity” impacts their work (or how diversity competencies could contribute to greater success);
- Ensure all employees feel included. Assign buddies to help new people on-board smoothly;
- Encourage team members to take a diversity training course;
- Formally restate CDC’s zero tolerance policy for harassment and bullying;
- Address diversity-based team tensions immediately and seek support if needed.

What employees can do

- Be aware of how your own cultural biases may show up in the workplace;
- Take diversity training;
- Provide suggestions to your Diversity Council;
- Lend support to new hires, help them to learn the ropes at CDC;
- Demonstrate your own personal value for diversity and inclusion every day;
- Report bullying to a manager you trust.

The Diversity and Inclusion Management Team of CDC’s Office of Minority Health and Health Equity continues to use the results of the report as it leads CDC’s efforts to become an even more diverse and inclusive agency.

