AGING AND ADULT-DEPENDENT CARE COMMITTEE (AADCC)

2019 AADCC ANNUAL REPORT

AADCC Introduction

Employer-sponsored information resources and support systems about elder care, adult-dependent care, and planning for aging are effective components of recruiting and retaining a skilled, dedicated workforce. The NIH can support the productivity and performance of employees coping with these multi-faceted and complex care situations by providing targeted policies, information, and services. The Aging and Adult-Dependent Care Committee (AADCC) was established in 2014 by a bridging committee between the NIH Child Care Board and the NIH Health and Wellness Council. A three-year charter was signed and implemented in 2017 through 2019. The AADCC, with 17 voting members and six liaisons, began addressing the mission and purpose of the charter in 2018.

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- Promote aging and adult-dependent care resources, information, and related services that are provided to the NIH workforce by the ORS;

- Research and recommend effective actions that meet the needs of the diverse NIH workforce in collaboration with the ORS Division of Amenities and Transportation Services, Child and Family Programs;

- Advise the ORS Director on the aging and adult-dependent care needs of the NIH workforce; and

- Report to the ORS Director on aging, adult-dependent, and eldercare programs and policies in support of the NIH mission.

2019 Membership and Workgroups

The AADCC membership comprises 17 voting members, six liaisons, and seven Well-being Ambassadors. Voting members were selected to represent a full range of careers and caregiver experiences within the NIH community. This diverse group leverages its combined talents to address research and evaluate the aging and adult-dependent care needs of the NIH workforce. Members serve for a two-year term and are required to attend quarterly meetings each calendar year. Participation in the AADCC is an official duty, requires supervisor approval, and may be included as a non-critical element on an employee's performance plan.

Voting Members 2018 - 2020
Ms. Jill Bartholomew, NCI (Co-Chair)
Ms. Cooper McLendon, NIA (Co-Chair)
Dr. Yvonne Bennett, OD
Ms. Agustina Boswell, NCI
Ms. Lynn Cave, NCI
Ms. Sarah Martyn Crowell, OD
Dr. Deborah Henken, NICHD
Ms. Linda Kiefer, OD
Ms. Judith Lavelle, NIAID
Ms. Martina Lavrisha, CC
Ms. Dawn Lea, NHGRI
Ms. Sandy Loether, OD
Ms. Lisa Poe, NHGRI
Ms. Annette Price, OD
Ms. Heather Rogers, NIDDK
Mr. Roy Wheat, NINDS
Dr. Dan Xi, NCI

Liaisons
Ms. Eva Chen, NIH Employee Assistance Program
Ms. Susan Cook, ORS
Dr. Chao Jiang, NIH Child Care Board
Mr. Rusty Mason, ORS
Ms. Brittany Patterson, Office of Human Resources
Dr. Elka Scordalakes-Ferrante, NIH Health and Wellness Council

Executive Secretaries
Ms. Tonya Lee, ORS
Ms. Shuntrice Holloman, ORS

Well-being Ambassadors
Ms. Quandra Blackeney, NIDA
Ms. Twann Jackson, OD
Ms. Sonia Marable, NIAID
Mr. Ryan Gonzales, NIDDK
Ms. Jenny Jones, NIAID
Mr. Chris Maurer, NCATS

2019 Work Plan

Based on the research and efforts of the 2018 Work Plan, the AADCC decided to continue with the established goals and expand activities to maximize their knowledge of the issues, and to formulate meaningful recommendations. To accomplish the activities and goals outlined by the full committee, the AADCC was divided into three workgroups: Communications, Research, and Partnership. The full committee met four times; each workgroup meeting at least four times during the year. The 2019 Work Plan is outlined below by workgroups.

Purpose

- Promote aging and adult-dependent care resources, information, and related services that are provided to the NIH workforce by the ORS;

- Research and recommend effective actions that meet the needs of the diverse NIH workforce, in collaboration with the ORS Division of Amenities and Transportation Services, Child and Family Programs; and

- Report to the ORS Director on aging, adult-dependent, and eldercare programs and policies in support of the NIH mission.

Activities
- Submit recommendations to the ORS Director to create and enhance policies and services.

Communications Workgroup
- Develop, review and revise marketing and outreach materials within the established brand for NIH outreach efforts; and
- Explore communication strategies to increase program awareness and utilization.
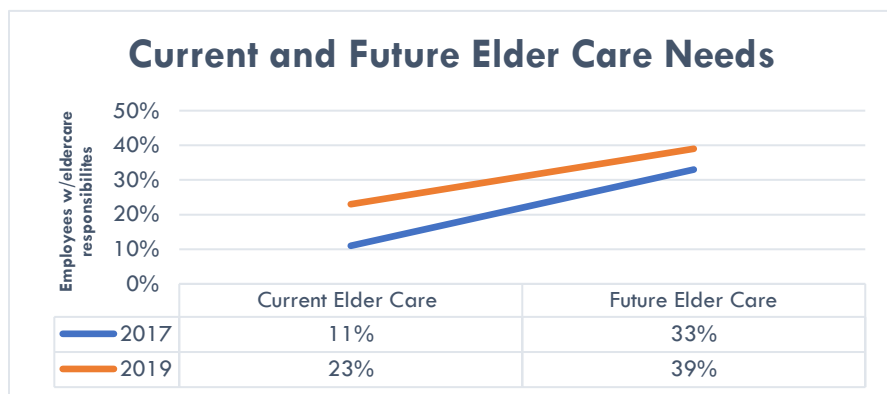
Partnership Workgroup
- Identify additional private and public resources and partners serving the aging and adult-dependent populations.

Research Workgroup
- Identify additional populations for targeted outreach that may be underserved or underutilized; and
- Monitor and report program utilization and identify gaps in aging and adult-dependent care resources.

Communications Workgroup – Ms. Martina Lavrisha & Ms. Lynn Care, Co-coordinators

One of the Communications Workgroup's major accomplishments in 2019, an expansion of a 2018 activity, was the evaluation of the Clinical Center (CC) Nurse Survey data compiled in December 2018. The data from a specific unique population (nurses) was compared to the 2017 OPM Federal Work-Life Survey.

Current and Future Elder Care Needs

	Current Elder Care	Future Elder Care
2017	11%	33%
2019	23%	39%

Results from both surveys showed an increasing number of NIH employees with eldercare responsibilities. See Chart 1.

Chart 1: Comparison of Current and Future NIH Elder Care Needs

Over 70% of nursing supervisors reported they had not received guidance on talking with employees about work-life programs and services. The majority (65%) of nurses were unaware of the current aging and adult care resources at NIH. This finding echoes previous 2017 OPM Work Life survey data.

To address this key lack of awareness of programs and services, the Communications Workgroup conducted and participated in several NIH awareness events, produced multiple articles for publication in various NIH news sources, as well as participated in other NIH outreach activities throughout the year.

To help increase the awareness of NIH work-life resources, particularly the 1-800-777-1720 NIH/ORS Resource and Referral Services, the CC Nurse Survey data was presented widely in various ways through:

- Dr. G. Wallen, CC Chief Nursing Officer, who supported the survey.
- The CC Nursing Wellness Committee.
- The CC Nursing Leadership Group.
- A *Clinical Center News* article in Spring 2019.
- Nurses Week in May 2019.
- *CRN News (on-line edition)* in May 2019.
- Work-Life@NIH: A Supervisor's Guide to Enhancing Workforce Well-being (see Appendix A) training provided to nursing supervisors in June 2019.
- Monthly updates of ORS-related activities that are now given to the Nurse Wellness Committee for distribution throughout the Clinical Center.

To promote aging-related interests NIH-wide, the Workgroup identified the following national months of celebration related to older adults, elder care, aging, and caregiving: May – Older Adult Month; October – Work and Family Month; and November – Family Caregivers Month.

In honor of Older Adults Month, the Workgroup hosted the Geroscience webinar presented by the National Institute on Aging's Dr. Felipe Sierra. There were 59 participants.

In June the Workgroup members volunteered to host an information table at the NIH Safety, Health and Wellness Day on the various NIH/ORS aging and adult/elder care programs and services. Participants were asked to answer questions related to caregiving issues and their awareness of the NIH programs and services using a consensogram format. See Figures 1 and 2.
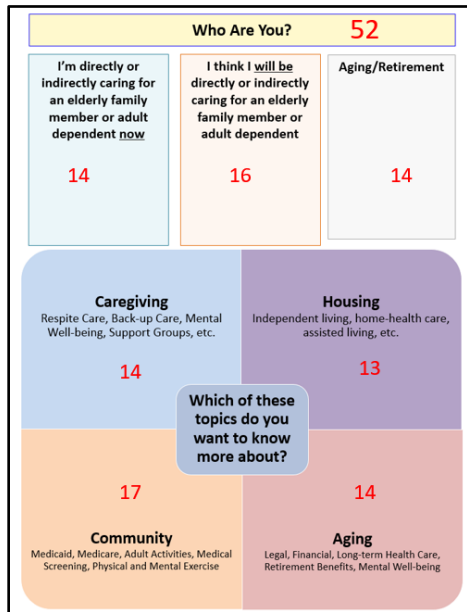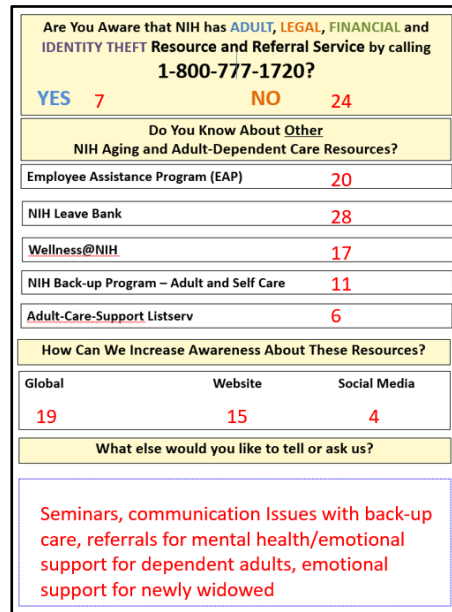

Figure 1: 2019 Consensogram

Figure 2: 2019 Consensogram

The results from the consensogram are consistent with the last four years of data captured at this event. The data indicated there is a need for aging and adult-dependent care services now and that the need will continue to increase in the future. Participants also expressed interest in knowing more about aging and retirement. The consensogram highlighted a huge gap in awareness about resources and that participants want to receive information via global email rather than social media.

The Workgroup disseminated information about existing resources to NIH employees by promoting the NIH/ORS Resource and Referral Services using new infographic posters and bookmarks that the workgroup created. These resources featured vignettes of individuals using adult/elder care, childcare, financial planning, identity theft, and legal consultation services. The infographic was distributed at ORS-sponsored events, including two major outreach events: Safety, Health and Wellness Day in June and the Work-Life@NIH Information Fair in October.

Photos of the AADCC efforts at the 2019 Safety Health and Wellness Day
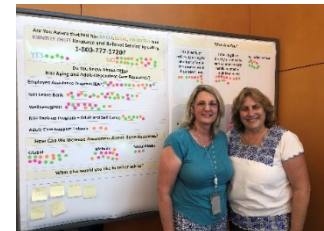
To promote Healthy Aging Month, the group prepared "*News You Can Use: Resources*" an article focusing on a variety of adult-dependent care services for publication in the online and print editions of the September-October *NIH Catalyst*.

Other efforts include:

- Global emails promoting various ORS webinars and events and referenced the *Catalyst* publication.
- A PowerPoint presentation to the new NIH Well-being Ambassadors. Ambassadors also received an invitation to attend future AADCC meetings.
- Staffed the AADCC tables during October Work and Family Month events.
- Weekly outreach postings on the Adult-Care-Support Listserv to promote various aging and adult/elder care resources and services.

Social media, specifically Tweeting, was not pursued because the ORS aging and adult-dependent care services are specific to employees and not the general public. However, the committee discussed utilizing internal social media platforms, such as ORS's social media channels in the future to disseminate information to the NIH workforce.

Future recommendations to support the AADCC include:

- Partner with the NIH Well-being Ambassadors to promote aging and adult-dependent care services.
- Market the NIH's status as a Top10 government agency on the CDC Wellness Check.
- Market and distribute the NIH ORS Resource and Referral Services infographic during future ORS events at NIH.
- Advise on the ORS website redesign to support a single-entry portal for various services—mobile optimized.
- Review utilization rates of the ORS aging and adult/elder care services.
- Meet with the Leave Bank coordinator to discuss marketing strategy successes and weaknesses to improve the distribution of elder and adult dependent care services.
- Collaborate and disseminate communications and infographics to the Deputy Director's Intramural Research (DDIR) web board and listserv http://ddir.nih.gov/DDIR.html.
- Recommend printing more AADCC marketing materials for distribution NIH-wide.
- Recognize the group's efforts—nominate for awards.
- Develop a strategic marketing plan to continue to promote aging and adult dependent services to NIH employees.

Partnership Workgroup – Ms. Linda Kiefer and Dr. Dan Xi – Co-coordinators

The Partnership Workgroup identified three goals in 2019: (1) Strengthen existing partnerships; (2) Cultivate new partnerships, and (3) Identify bold goals for 2020. Efforts are listed below.

Goal 1: Strengthen Existing Partnerships

The Workgroup collaborated with the Employee Assistance Program (EAP) counselors to identify gaps in aging and adult care resources. Ms. Eva Chen, EAP Manager, presented a webinar on October 3, 2019, called "*Navigating Life's Transitions*", for Work & Family Month. Ms. Donna O'Neill, EAP Consultant, presented webinar; "*Caregiver Resources",* on November 6 for National Caregiver Month.

The Workgroup collaborated with the Health and Wellness Council (HWC) in March by conducting extensive research on existing NIH resources, tools, upcoming events, and NIH-funded research on aging and caregiving. The results of this research served to provide content for the redesign of wellness@nih.gov. The Workgroup also provided over 100 links to these resources as well as links to relevant content from other federal agencies and national organizations.

The Workgroup collaborated with the Office of Human Resources (OHR) to identify effective ways to raise awareness of existing flexible work schedules and leave options, improve ITAS functionality, and enhance policies that improve workplace flexibility and benefits for aging workers and caregivers. At the request of the Workgroup, the OHR liaison, Ms. Brittany Patterson, delivered an informative presentation to the AADCC about numerous flexible work schedules, including AWS and Telework, as well as leave options, including Leave Bank, FMLA, Benefits Calendar, and the Federal Long-Term Care Insurance Program (FLTCIP). This knowledge will be used in future efforts to address how the NIH workforce can meet both work and caregiving responsibilities.

With input from the AADCC, the OHR updated the NIH Workforce Resource Eligibility Matrix (see Appendix B) to include adult-dependent and eldercare resources.

The Workgroup developed a spreadsheet tool to help the AADCC working groups keep track of their projects and action items. This tool will assist the AADCC in avoiding duplication of effort and make reporting easier and more streamlined.

Goal 2: Cultivate New Partnerships

A new partnership was cultivated with the NIH Federal Credit Union (NIHFCU) to host free financial retirement benefit planning seminars/webinars. Through the NIHFCU, experienced professionals are available to speak to the NIH workforce on over 26 topics, e.g., Understanding Social Security and Medicare benefits, Retirement

Income Planning, Social Security Benefits, Estate Planning, and Long-Term Health Care. For National Caregiver Month, the NIHFCU has agreed to host a series of quarterly webinars beginning November 21 with "*Understanding Social Security and Medicare Retirement Benefits*." The Workgroup collaborated with the Communications Workgroup to invite Dr. Felipe Sierra, founder of Geroscience at NIA, to give a talk on May 15. See Figure 3.

Figure 3: Title slide of the May 15 Geroscience presentation

Co-coordinators attended the Trans-NIH Geroscience Interest Group (GSIG) summit (Nov 4-8) and learned more about geroscience research and initiatives across the NIH.

Top funders of Aging and Caregiving Research were identified by using data from FY17 portfolio analyses. The top five Institutes for aging research are NIA, NHLBI, NCI, NINDS, and NEI. Caregiving research includes NIA, NINR, NCI, NIMH, and NICHD. See Chart 2.

TOP NIH ICs funded research on Aging and Caregiving, and Elder Care		
Aging	Caregiving	Elder Care
NIA	NIA	NIA
NHLBI	NINR	NINR
NCI	NCI	
NINDS	NIMH	
NEI	NICHD	

Chart 2: Top NIH ICs Funded Research on Aging, Caregiving, and Elder Cares

The top ICs that funded research on caregiving for elderly care included NIA and NINR, in which more than 50% of the research is on dementia, Alzheimer's, and cognition. In 2017 the NIH funded 13 training and career development grants and 73 R01 grants in research on caregiving for elder care.

The AADCC participated in National Work & Family Month (October) activities and the Work-life@NIH Information Fair on October 22. The following ICs provided information: NIA, NHLBI, NINR, NICHD, NEI, and the NIH Blueprint for Neuroscience Research.

2019 Work-Life@NIH Information Fair

Goal 3: Bold goals for 2020:

- Partner with the Wellness Ambassadors to help promote the aging and adult-dependent care services resources across all ICs at NIH.
- Assist the Communication Workgroup market the new NIH ORS Resource and Referral infographic and participate in ORS outreach events to the NIH.
- Support the development of a single-entry portal for various services, advise on website updates and better ways to promote these resources.
- Analyze and make a recommendation(s) on utilization rates of the ORS aging and adult-dependent care services to maximize impact of services.
- Support the Research Workgroup to routinely survey the NIH community to discover new needs and interests.

- Collaborate with the Deputy Director's Intramural Research (DDIR) web board and listserv http://ddir.nih.gov/DDIR.html.
- Collaborate with the Trans-NIH Geoscience Interest Group (GSIG)— to help raise awareness and share ideas within the NIH about aging biology as a major risk factor to age-related diseases and the potential benefits of Geroscience approaches for the treatment of those diseases; support funding initiatives that support aging biology as a risk factor for such diseases; and lifespan studies starting with pregnancy.
- Partner with the ORS Director to make aging and adult-dependent care issues a priority and part of the ORS mission, to consider for inclusion:
  - Funding and promoting events specifically targeted to aging and adult/elder care issues.
  - Mandatory training for NIH supervisors - Work-Life@NIH: A Supervisor's Guide to Enhancing Workplace Well-being.
- Continue exploring partnerships to promote the current and future needs of the NIH workforce.

Research Workgroup – Ms. Sandra Loether and Ms. Jill Bartholomew – Co-coordinators

In 2019 the Research Workgroup continued to analyze and evaluate various survey instruments that aim to gather information related to the aging and adult-dependent care needs of the NIH workforce. Specifically, the Research Workgroup developed and submitted questions for consideration on the 2020 Life@NIH Survey. The 2020 Life@NIH Survey will incorporate the previous 2012 Life@NIH Survey and the 2017 OPM Federal Work-Life Survey questions. The 2020 Life@NIH Survey will, for the first time, incorporate aging and adult/elder care needs and services as a separate focus area. The 2012 Life@NIH Survey had previously been used to assess use and awareness of work/life integration programs and services such as flexible works schedules, wellness support and, for the first time in a needs assessment survey, current and future adult/elder dependent care needs. The workgroup submitted recommendations to modify existing Life@NIH questions, as well as proposed the inclusion of additional questions to more accurately capture the work/life needs of employees when the survey is re-administered in 2020.

In addition, the workgroup partnered with the communications workgroup by spearheading the development of the NIH Clinical Center Nursing Survey. Additional data from other surveys such as the NIH IC Exit Surveys (see Charts 3 and 4) and the NIH FEVS data (see Chart 5) reinforced the fact that employees across the NIH need aging and adult dependent care resources, but many are unfamiliar with the resources that are offered. The workgroup highlighted the notable findings of the surveys and the AADCC impact.

NIH IC Exit Surveys

Reasons for Separation for People Leaving NIH or Transferring ICs
Select up to 3
(2,007 Responses)

| Reason	Count
Retirement	844
Promotion/Higher Salary/ Advancement Potential	492
Career Change	323
Organizational Culture	275
Other	238
Learning/Developmental Opportunities	216
Dissatisfaction with Work Duties or Responsibilities	213
Supervisor	213
Relocation/Moving	181
Inadequate Recognition	176
Commute	155
Workplace Conflict	108
Work Schedule Flexibilities	98
Inadequate Resources	95
Continued Education	64
Child Care	26
Elder Care	25
Ethic Requirements and Financial Disclosures	16

Count of Responses

Notable finding: Retirement is #1 reason for separation; however, many leave due to care concerns.

AADCC Impact: Could increase awareness of care services increase retention?

Partner w/ OHR to incorporate education on workplace flexibilities & policies.

Chart 3: Summary of NIH Exit Survey Report: Eldercare – Related Questions from FY2015 to FY2019
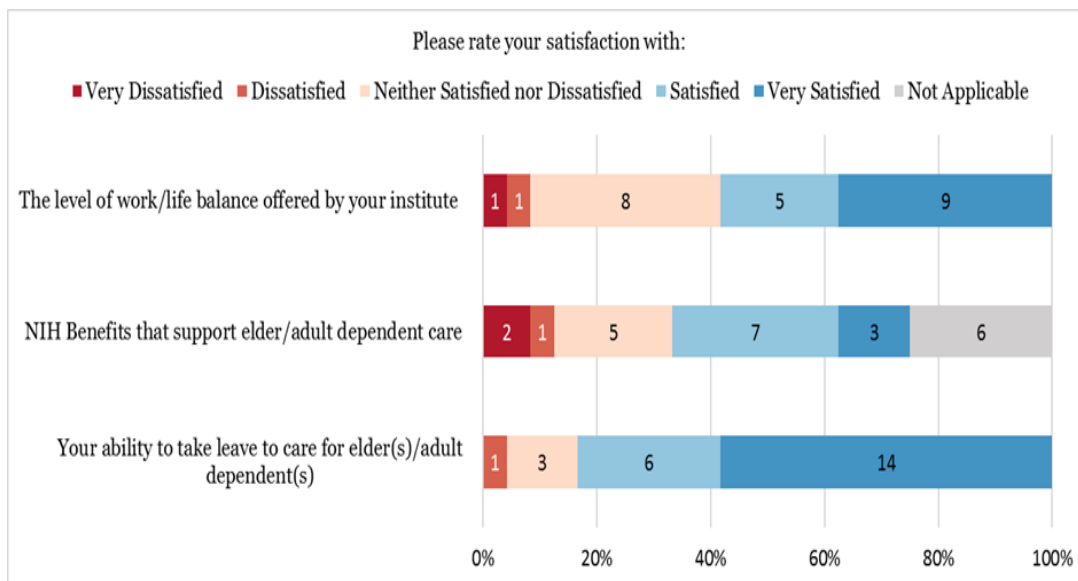
Notable Finding:
Respondents who indicated elder care as the reason for departure are mostly satisfied with NIH.

AADCC Impact:
Is awareness of back-up care programs a reason for departure?

Chart 4: Summary of NIH Exit Survey Report: Elder Care – Related Questions from FY2015 to FY2019

The workgroup reviewed the NIH FEVS reports from C14 to CY18 for eldercare-related questions. The notable findings are as follows:

- No significant data on the use or satisfaction of aging and adult-dependent services and programs.

- The steady increase reported by employees reflect positively (leadership support for work/life programs, Q 62).

- Leadership support for work/life programs is the highest it's been – 70.7% in CY17; 73.1% in CY18.

- Limited participation in health and wellness programs and offerings. Many indicate a lack of awareness as a reason.

NIH FEVS CY18

Question	Number of responses	Positive	Neutral	Negative	Do Not Know/No Basis to Judge
Q62. Senior leaders demonstrate support for Work/Life programs.	9,721	73.1%	18.7%	8.3%	842

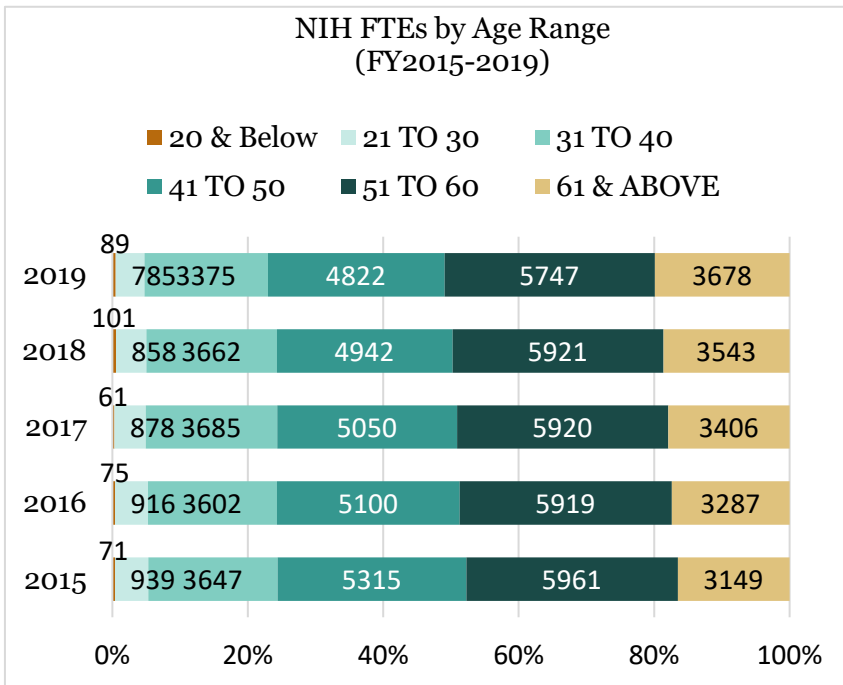*Chart 5: Leadership Support for Work/Life Programs in CY18*

The AADCC impact:

- NIH needs its own survey to assess workforce needs.
- Supervisor trainings and presentations need to continue, increase, and become mandatory.
- Awareness, awareness, awareness.

The research workgroup also compared the NIH Work-Life Policies with 14 other federal agencies including DOD, Walter Reed, VA, FDA, and NASA. Notable findings include: The NIH is among the top providers for work-life policies/programs provided to its workforce. The AADCC impact includes the following policies/programs currently not offered by the NIH, but that are provided by other federal agencies:

- Elder Care/Adult-Dependent Care Subsidy Program (DoD).
- Technology Tools: Navigator Resource Portal, mobile app (DoD).
- Outside Elder Care Center (VA).
- Handbook on Workplace Flexibilities Plans and Elder Care (DoD).
- Elder Care Consultant Led Support Groups (OPM, STATE, NASA, CDC).

Finally, the research workgroup reviewed and analyzed the NIH FTE population data, which provided a unique insight into important population trends. Specifically, the data highlighted the fact that the average age of the NIH workforce is 50. (See Chart 5). Information such as this can help us anticipate the needs of employees through the various phases of their careers.

NIH FTEs by Age Range (FY2015-2019)

Legend: 20 & Below | 21 TO 30 | 31 TO 40 | 41 TO 50 | 51 TO 60 | 61 & ABOVE

Year	(20 & Below)	21 TO 30	31 TO 40	41 TO 50	51 TO 60	61 & ABOVE
2019	89	785	3375	4822	5747	3678
2018	101	858	3662	4942	5921	3543
2017	61	878	3685	5050	5920	3406
2016	75	916	3602	5100	5919	3287
2015	71	939	3647	5315	5961	3149

Notable Findings:

Female > male caregivers

Largest cohort: 51 − 60 years

Avg retirement age: 65

Hiring reduction across NIH

AADCC Impact:

Targeted focus on screenings, health seminars, LTC insurance, life transitions, etc.

Recruitment and retention implications

Chart 5: NIH FTEs by Age Range (FY2015-2019)

Recommendations offered by the workgroup included: support surveys that focus on the aging and adult-dependent/elder populations; continue to leverage data to promote and support the existing aging and adult-dependent care services; continue to offer and collect data from NIH supervisors on the awareness of aging and adult-dependent care issues.

The workgroup also recommends working with ORS to develop a single portal for various NIH services assisting employees with well-being, work-life, aging, and family responsibilities. Looking forward, the workgroup will explore collaborating with the Deputy Director's Intramural Research (DDIR) web board and listserv as well as the Trans-NIH Geoscience Group (GSIG). It will strive to encourage NIH leadership to elevate aging and adult-dependent/elder care issues to a high priority of the agency and to provide funding for bold initiatives

Proposed Work Plan for 2020

The Research Committee will:

- Assist in developing questions for the 2020 NIH Work-Life survey to determine the best value of NIH resources for its aging workforce and the caregiving responsibilities of that workforce.
- Continue partnering with ORS and EAP to assess program use and identify gaps in aging and adult-dependent care resources.
- Review the NIH IC Exit Survey data to better understand service utilization rates and turnover factors.
- Review evaluation data from the 2020 WorkLife@NIH: A Supervisor's Guide to Enhancing Workforce Well-being to determine future training topics for supervisors.
- Create a plan to assess, monitor, and evaluate current aging and adult-dependent programs and services annually.
- Consider adding a dropdown function in ITAS so employees can accurately capture their leave intentions related to caregiving.
- Compare 2017 and 2018 FEVS work-life program data and develop recommendations, if needed.

Recommendations

Based on the AADCC efforts provided in this report, the AADCC makes the following recommendations to ensure aging and adult-dependent care programs and services remain relevant and meet the evolving needs of the NIH community:

Current

- Continue to support and fund existing aging and adult-dependent care programs for the entire NIH workforce.
- Provide resources (staff and funding) to develop, implement, and evaluate an aggressive communications plan highlighting aging and adult/elder care issues.
- Continue to support and implement the 2020 Life@NIH Survey with assistance from the AADCC to accurately assess aging, adult-dependent, and elder care needs, as well as overall satisfaction with current programs.
- Continue to offer and collect data from NIH supervisors on the awareness of aging and adult-dependent care issues.
- Expand existing resources, such as providing a Geriatric Caseworker to assist with caring for an adult.
- Provide resources and staff support to coordinate and execute a mini-conference to showcase the NIH research and how to "Take Our Own Best Advice" related to caregiving, aging, and adult/elder care.
- Support the development of a single webpage for various NIH services assisting employees with well-being, work-life, aging, and family responsibilities.
- Leverage the government and private acknowledgments of NIH being a great place to work.
- Continue to include the AADCC in the ORS Website Redesign.

On the Horizon

- Aging – Are we meeting the needs of the aging NIH workforce?
- Subsidy Assistance for Adult/Elder Care.
- Support surveys that focus on the aging and adult-dependent/elder populations.
- Continue to leverage data to support the existing aging and adult-dependent care services.
- NIH Leadership to elevate aging and adult-dependent/elder care issues to a high priority of the agency and provide funding for bold initiatives.
- Analyzing the 2020 Life@NIH Survey data and use the results to implement change across the NIH
- Evaluate the level of support and resources needed to effectively address the current and future needs of the NIH workforce related to adult/elder care, well-being, work-life, aging, and family responsibilities.
- Advocate for the necessary resources (staff and funds) required to effectively meet the needs of the NIH.

2020 – 2024 Charter and Membership Roster

The AADCC successfully developed and received a new five-year charter (2020 – 2024) signed by the Deputy Director of Management, Dr. Alfred C. Johnson. (See Appendix C). The AADCC conducted a membership campaign to appoint new voting members. There are 13 voting members to carry out the new charter. Seven previous voting members wished to continue with the committee and six new voting members joining them. See below. The appointments for the 13 voting members were staggered to ensure continuity of knowledge and efforts.

Voting Members 2020
Ms. Jill Bartholomew, NCI (Co-Chair)*
Ms. Cooper McLendon, NIA (Co-Chair)*
Mr. Joe Balintfy, NIA
Mr. Virgilio Bundoc, NIAID
Dr. Deborah Henken, NICHD*
Ms. Linda Kiefer, OD*
Ms. Martina Lavrisha, CC*
Ms. Dawn Lea, NHGRI*
Ms. Carla Mells
Ms. Melissa Porter, NCI
Mr. Mark Rubert, CSR
Ms. Diana Rutberg, NIDCR
Dr. Dan Xi, NCI*

Previous Voting Member

Liaisons
Ms. Eva Chen, NIH Employee Assistance Program
Ms. Susan Cook, ORS Advisor
Dr. Chao Jiang, NIH Child Care Board
Mr. Rusty Mason, ORS
Ms. Brittany Patterson, Office of Human Resources

Executive Secretaries
Ms. Tonya Lee, ORS
Ms. Shuntrice Holloman, ORS

Well-being Ambassadors
Ms. Quandra Blackeney, NIDA   Mr. Ryan Gonzales, NIDDK
Ms. Twann Jackson, OD   Ms. Jenny Jones, NIAID
Ms. Sonia Marable, NIAID   Mr. Chris Maurer, NCATS

2020 Draft Work Plan

Based on the Workgroup's action items for 2019, the AADCC 2020 Draft Work Plan is presented below. The new AADCC Committee will review and discuss the draft plan at the first meeting of the year on February 11, 2020.   The 2020 Work Plan will be approved at the May 19, 2020 meeting.

Communication Workgroup

- Market ORS Resource and Referral Infographic to help increase the awareness of services and programs.
- Publish articles and increase presence on internal social media channels, including Twitter chat.
- Disseminate information in alignment with annual health-related observances.
- Develop a relationship with NIH communications contacts to help with the dissemination of information via multiple social media outlets.
- Collaborate with the NIH Office of Human Resources and the NIH Leave Bank on raising awareness of existing leave and flexible work schedule options through education and training.
- Collaborate with the Research Workgroup to explore effective dissemination channels for aging and adult-dependent care resources, such as the Wellness@NIH website.
- Increase collaboration with partners such as EAP and the NIH Health and Wellness Council to promote the ORS Resource and Referral Services.
- Partner with the NIH Child Care Board and NIH Leave Bank staff to learn about program marketing strategy successes and challenges from their successfully marketed NIH programs. Partner with the NIH Health and Wellness Council to provide input and resources for enhancing the Wellness@NIH website.
- Invite ICs to showcase their relevant research initiatives at upcoming wellness/caregiver fairs.

Research Workgroup

- Assist in developing questions for the 2020 NIH Work Life survey to determine the best value of NIH resources for its aging workforce and the caregiving responsibilities of that workforce.
- Review the NIH IC Exit Survey data to better understand service utilization rates and turnover factors.
- Continue to review the NIH policies related to aging and adult-dependent care issues.
- Continue to partner with EAP to assess program use and identify gaps in aging and adult-dependent care resources, such as locating resources for aging parents who are unable to retire while continuing to care for adult-dependents with intellectual and developmental disabilities.

Appendix A: Work-Life@NIH: A Supervisor's Guide to Enhancing Workforce Well-being

Work-Life@NIH:
A Supervisor's Guide to Enhancing Workforce Well-being

During this *free* workshop, you will:

▪ Discuss the components of workforce well-being and how it can benefit your organization;

▪ Learn about policies and programs the NIH offers to promote workforce well-being; and

▪ Strategize regarding how to manage requests for these policies and programs as a supervisor.

This workshop is taught by NIH Subject Matter Experts and has been approved for **2 Continuous Learning Points** for supervisory refresher purposes.

Registration via LMS Course #NIHWRD1003

• February 18, 2020, 9:00 to 11:30AM, in 6700B Rockledge, Conference Rooms A - C

• May 19, 2020, 9:00 to 11:30AM, in Building 10, FAES Classrooms 3 & 4

• October 27, 2020, 9:00 to 11:30AM, in Building 1, Wilson Hall

Questions? Email Courtney Bell

Courtney.Bell@nih.gov

NIH National Institutes of Health
Office of Management

Appendix B: NIH Workforce Resource Eligibility Matrix

NIH Workforce Resource Eligibility Matrix

	Workforce Resources	Title 5 Employees			Executives	Title 42 Employees					Trainees			Volunteers & Special Volunteers	Guest Researchers	Senior Biomedical Research Service	Commissioned Corps	Contractor
		GS	WG	GP/GR Title 38	SES and Top 5	Undergrad Scholarship Program (UGSP)	Clinical or Research Fellow	Staff/Senior Clinician or Scientist	SSO or SPL-2	Tenure Track & Tenured Investigators	Summer Interns	IRTAs & CRTAs	Visiting Fellows					
Parenting, Childcare & Elder Care Resources	Resource & Referral Services - Child, Adult, Legal, Financial & Identity Theft	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
	Family Resources	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
	NIH Child Care Centers	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes	No
	NIH Child Care Subsidy	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No	Yes	Yes	No
	NIH Back-Up Care	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No	Yes	Yes	No
	Nursing Mothers Program	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Leave & Work Flexibility	NIH Leave Bank	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No	Yes	No	No
	Voluntary Leave Transfer Program	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No	Yes	No	No
	Sick Leave for Family Care and Bereavement	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	These programs are not applicable but there may be individually determined flexibility at the supervisor's level.			These programs are not applicable but there may be individually determined flexibility at the supervisor's level.		Yes	Yes (per Corps Policy/Procedures)	No
	Telework	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes						Yes	Yes	Yes
	Alternative Work Schedules	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes						Yes	Yes	Yes
	Family Medical Leave Act	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes						Yes	No	Yes
	Keep the Thread	No	No	No	No	No	No	No	No	No	No	Post-Docs only	No	No	No	No	No	No
	Stop the Clock	No	No	No	No	No	No	No	No	Tenure Track Only	No	No	No	No	No	No	No	No
Funding & Student Loans	Intramural Loan Repayment Programs	Yes	Yes	Yes	No	No	Yes	Yes	No	Yes	No	No	No	No	No	Yes	No	No
	Student Loan Repayment Program	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	No	No	No	No	No	Yes	No	No
Safety & Well-being	Employee Assistance Program	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	One-time Consult	Yes	Yes	One-time Consult
	Fitness and Well-being	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
	NIH Civil Program	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Conflict Resolution & Complaints	Ombudsman	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
	EEO Complaint Process	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes (per Corps Policy/Procedures)	Yes
	Negotiated Grievance Procedure	Bargaining Unit employees utilize Negotiated Grievance Procedure, all other employees utilize HHS Administrative Grievance									No	No	No	No	No	No	No	No
	HHS Administrative Grievance										No	No	No	No	No	Yes	No	No
Commuting & Parking	Parking	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes
	Transhare	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	No
	Rideshare	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes, w/o subsidy	Yes	Yes	Yes, w/o subsidy

Appendix C: 2020-2024 AADCC Charter

NATIONAL INSTITUTES OF HEALTH
AGING AND ADULT-DEPENDENT CARE COMMITTEE
January 2020

MISSION

The NIH Aging and Adult-Dependent Care Committee (AADCC), will research, promote and recommend effective actions to meet the aging and adult-dependent care needs of the diverse NIH workforce. The AADCC will advise the NIH Leadership on targeted programs and policies to support the productivity and performance of employees with adult-dependent care responsibilities, and an aging workforce. Employer-sponsored resources and support systems related to adult- dependent care and an aging workforce are effective components of recruiting and retaining a skilled dedicated workforce.

OBJECTIVES

The AADCC will:

- Serve as an advocate for the availability of aging and adult-dependent care information, resources, and services to the NIH workforce.

- Serve as a forum for discussion and exploration of aging and adult-dependent care issues affecting the NIH workforce.

- Promote and advertise programs and policies that support employees when they have roles as caregivers or care managers in addition to maintaining their work roles.

- Collaborate with other NIH organizations to achieve its vision and mission.

- Develop an annual action plan to direct AADCC efforts to meet these objectives.

- Prepare an Annual Report to the NIH Leadership on the status of NIH aging and adult- dependent care programs, areas of concern and/or opportunity, and any related recommendations.

APPOINTMENT

NIH federal employees interested in serving on the AADCC as voting members will submit a Membership Application form (including supervisor approval) to the Child and Family Program Manager, Division of Amenities and Transportation Services (DATS) in the NIH Office of Research Services (ORS). The program manager will then forward a copy to the AADCC Membership workgroup for review and consideration. After reviewing all applications and conducting selected interviews, the Membership workgroup will provide a list of potential members to the AADCC. The AADCC will vote on the list and provide its recommendation in writing to the DATS Director. The DATS Director will forward the recommendations to the ORS Director for review.

The ORS Director will forward the nomination packet to the NIH Deputy Director for Management for appointment. The NIH Deputy Director for Management will notify appointees in writing of their appointment to the AADCC.

VOTING MEMBERS

The voting membership will comprise at least nine (9) federal employees (including Co-Chairs). The members should span the diverse interests and needs of the NIH community.

TERMS AND VACANCIES

Voting members of the AADCC serve three-year terms. Voting members may serve no more than one (1) initial partial term, plus two additional three-year terms. To preserve continuity and procedural effectiveness, the terms for voting members will be staggered; no more than one-third of the AADCC members shall be replaced in any given year.

EX-OFFICIO and LIAISONS

Ex-Officio members shall include the NIH Child and Family Programs Manager, the ORS Director, and the designated ORS Advisor. The NIH Child and Family Programs Manager will serve as the permanent Executive Secretary of the AADCC. The liaison representatives are from NIH organizations that have an interest in aging and adult-dependent care policies and programs. These include, but are not limited to, the NIH Child Care Board, NIH Health and Wellness Council, NIH Office of Human Resources, NIH Employee Assistance Program, and the National Institute on Aging. The liaison representatives may serve indefinite terms.

MEETINGS and ATTENDANCE

Regular meetings will be held at least four (4) times a year. The Co-Chairs may call additional meetings as necessary and may also call closed sessions of voting members only. The Chairperson may also request a voting member's resignation if the member fails to attend three (3) consecutive meetings. Three-fourths of the voting members will constitute a quorum for the transaction of the AADCC's official business. Meetings may be held in the absence of a quorum; however, official votes may not be taken unless a quorum is present.

RECORDS and REPORTS

The AADCC may request information as needed for the purposes of carrying out its functions. The AADCC will report at least annually in writing or in person to the NIH Deputy Director for Management on the status of aging and adult-dependent care programs and other related services at NIH, identify areas of concern, and recommend actions when necessary. The DATS will provide an administrator to manage the business of the AADCC, prepare correspondences and minutes, record attendance at meetings, maintain membership lists, obtain conference room space, notify members of meetings, and maintain the permanent files of the AADCC.

TERMINATION DATE

The AADCC will terminate five (5) years from the date this Charter is approved unless renewed by the NIH Deputy Director for Management and re-commissioned prior to its expiration.

APPROVED

Alfred C. Johnson -S   Digitally signed by Alfred C. Johnson -S
                        Date: 2019.12.16 09:49:55 -05'00'

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Deputy Director for Management, National Institutes of Health