

NIH Guidelines – Know Your Tier and Be Prepared

Employee Emergency Tier Designation Program

Issuing Office: OD/OHR & ORS, Release Date: 6/8/2022

Contact: OHR/WRD: workflex@nih.gov

Introduction

NIH has a Continuity of Operations Plan (COOP) in place that is designed to ensure maintenance of NIH mission essential functions while also protecting the health and safety of NIH employees, patients, and visitors. All NIH employees must be designated as “Emergency,” “Non-Emergency/Teleworker,” or “Non-Emergency/Non-Teleworker.” The Emergency Tier Designations (ETD) are made by IC Management and have been developed based on guidelines from the Office of Personnel Management (OPM) and the principles articulated in Federal Continuity Directives 1 and 2, as amended. ETDs will be used when there are emergency conditions affecting the employee’s official duty station and would be authorized by the Office of Personnel Management, Department of Health and Human Services, and the NIH. ***ETDs only apply to emergency situations at the employee’s official duty station.*** If there is an emergency at another location not impacting the employee, the employee would continue their normal duties at their official duty station.

Emergency Tier Designations (ETD)

ETDs are tiered in three categories based on the activities/functions performed that support the NIH/IC mission and if the employee has an approved HHS Workplace Flexibilities Agreement (WFA). The methodology applies a series of tests to determine which functions are necessary to operate the NIH during an array of emergencies. All NIH employees must be assigned to a specific Tier. This same rationale can be applied to NIH contractors. The Contracting Officer Technical Representatives (COTRs)/Project Officers should work with IC leadership and procurement to ensure that all contract awards reflect necessary emergency requirements.

Tier I – Emergency Employees (Mission Essential): Employees designated as “Emergency” must remain at work onsite or report to work onsite at the regularly scheduled start of their duty hours upon notification of delayed openings, early dismissals, closures, and other announcements regarding the use of unscheduled telework or unscheduled leave by the OPM, NIH, senior leadership in the Office of Human Resources (OHR) and the Office of the Director (OD), or their IC unless otherwise directed by their supervisor. If Tier I employees are not scheduled to start their tour of duty when an emergency event impacts normal operations and their presence is required to maintain continuity of operations, their supervisor or an authorized official will contact them, as necessary. Some Tier I employees may perform their duties outside normal NIH operating hours (after hours, weekends, and holidays) as part of their normal work schedule.

Tier I – Emergency Employees are typically those employees who are involved in or support the following functions during delayed openings, dismissals, and closures:

- Patient Care Staff
- Patient Care Support Staff, including Patient Support Staff
- ORF Building Maintenance/Boiler Plant Staff
- ORS Fire Department Staff
- ORS Police Department Staff
- Employees responsible for maintaining critical information technology (IT) infrastructure
- Animal Care Staff
- Utility Systems Staff
- Wastewater Treatment Operator

Tier II – Non-Emergency/Teleworkers (Mission Critical): Employees designated as “Tier II – Non-Emergency/ Teleworkers” are assigned to functions whose omission would negatively impact the ability of the agency to perform its Mission Essential Functions (Appendix 1) and IC Critical Program and Business Operations Functions. These functions could be performed at an alternative worksite and, therefore, employees who participate in the NIH Telework Program with a current and approved WFA with routine and/or with ad hoc/situational telework selected would be expected to telework during emergencies. They may also be called by their supervisor to report to work onsite to maintain continuity of Government operations during emergencies involving incidents of national security, natural/man-made disaster, extended emergencies, or other unique situations such as a pandemic influenza outbreak. See Appendix 2 and 3 for general examples of possible onsite and offsite functions.

Employees designated as Tier II – Non-Emergency/Teleworkers are typically responsible for the following activities:

Directing, organizing, planning and/or executing NIH Mission Essential Functions
Typically includes:

- NIH Senior Management Group (SMG)
- Designated IC Leadership (Director, Deputy Director, Scientific Director, Executive Officer, Clinical Director, and Extramural Program Leadership)
- NIH COOP Operations and Emergency Support Team Leads
- IC Emergency Coordinators
- Chief Security Officer (ORS Director)

Directing, organizing, planning, and/or executing NIH and IC Program and Business Functions
Typically includes:

- COOP Emergency Support Team Members
- IC Crisis Response Team Functional Team Leads and Members (excluding those that may be in a higher Tier, e.g., Patient Care and Animal Care)
- Deputy Chief Security Officer (Associate Director for Security and Emergency Response)
- OM Business Continuity Team (OMBCT), OD Director, and Division Directors or equivalent

- Personnel involved in conducting intramural research or directly supporting the conduct of intramural research pertaining to that research that could be performed at an alternative work site during an emergency
- Personnel involved in supporting critical IT service and support functions

Performing administrative or programmatic functions which support the mission of the IC and can be performed from an alternative work site during an emergency

Tier III – Non-Emergency/Non-Teleworkers (Other Mission Services and Support): Employees designated as “Tier III – Non-Emergency/Non-Teleworkers” include the following:

- Employees whose functions must be performed onsite at their duty station but not at the onset of an emergency
- Employees whose functions must be performed onsite at their duty station but not during an emergency when the emergency impacts their duty station.
- Employees who are on an approved WFA for remote work, who do not participate in telework.
Note- An employee whose home is considered the employee’s official worksite is generally not granted weather and safety leave when the employee’s parent office (i.e., the office where the employee would work but for the remote work arrangement) is closed, since the employee is able to safely perform work at an approved location. For remote employees, the official worksite is their approved alternate worksite therefore, as long as they are able to safely perform work, they should work.
- Employees who are not eligible to telework
- Employees who choose not to participate in the NIH Telework Program

Exceptions:

The following exceptions to the ETD descriptions above apply:

- If an employee whose function is listed in the Tier II section above does not have portable work, they may maintain their function as a Tier III. As a Tier III employee, they may be called by their IC Director or his/her designee to report to their regular duty station during an emergency situation to maintain continuity of Government operations.
- When “Federal Offices are OPEN and Unscheduled Telework/Unscheduled Leave” is announced: Tier II and III employees may be called by their IC Director or his/her designee to report to work onsite to maintain continuity of Government operations.
- When “Federal Offices are CLOSED” is announced: During emergencies dealing with national security, extended emergencies, and other unique situations, Tier II employees may be called by their IC Director or his/her designee to report to their regular worksite or alternative worksite under their telework agreement, and Tier III employees may be called to work at their regular worksite to maintain continuity of Government operations.

ETD COODINATOR

The Executive Officers of each IC have identified ETD Coordinators who will serve as point of contacts to effectively implement the ETD program within their IC. A listing of all ETD Coordinators can be found in the Emergency Preparedness and Continuity of Operations section of the NIH Administrative Hub via <http://adminhub.nih.gov>.

The ETD Coordinators will be responsible for the following activities:

- Ensure that the employees within their IC have been designated, notified, and understands

their ETD

- Designate and notify new employees in their IC within two pay periods of the employee's entry on duty date
- Work with the IC's Administrative Officers (AOs) and Administrative Technicians (ATs) to enter or change an employee's ETD in the NIH Enterprise Directory (NED) or utilize the NED ETD Module themselves to enter or change an employee's ETD
- Run the standard nVision ETD report as requested for their IC
- Respond to NIH quarterly updates from OHR

ETD NOTIFICATIONS & ACKNOWLEDGMENTS

All employees must be notified of their ETD, and the employee is responsible for acknowledging their understanding of the requirements of their ETD as described in their notification. If an employee does not acknowledge his designation, he or she is still expected to comply with the requirements of their notification.

- Tier I Employees must be notified annually *in writing* of their ETD. Notifications must come from the employee's supervisor of record or higher or on behalf of this designated individual. To acknowledge their notifications, Tier I employees may either sign a hard copy document, sign using an electronic/digital signature that includes a stamp of authentication with the date, or use a single sign-on that is tied to the employee's PIV card.
- Tier II and Tier III Employees can be notified of their ETD in writing or by email. Tier II and III employees are not required to be notified annually unless their union contract requires annual notifications. All Tier II and III employees' tiers should be reevaluated annually to ensure that the employees' ETDs are correct based on their functions and their telework agreement status, if applicable. If there is a change in an employee's ETD, then measures should be taken to notify the employee of their new ETD in writing or by email and obtain their acknowledgement.
- Tier II and III employees may acknowledge their ETD in writing or by email indicating that they have received and understand their ETD. If there is no change in an employee's ETD and the employee is not bound by union contract requirements, there is no need for additional future notifications or acknowledgments.

Appendix 1 – NIH Mission Essential Functions

1. Protect all patients on the NIH campus by maintaining the Clinical Center patient care areas as needed, and by providing limited food services in Building 10.
2. Protect all NIH personnel and assets by ensuring the safety of employees and facilities.
3. Protect all animals used at the NIH by providing appropriate animal care services and providing the ancillary logistical support to ensure necessary supplies (e.g., food and bedding) are available.
4. Protect vital research including facilities, equipment, resources and records by maintaining scientific data, physical specimens (live and preserved) and documentation (hard copy and electronic); maintaining unique biological stocks; providing acquisition services as required; providing facilities support, such as emergency power; and providing critical facility and grounds maintenance.
5. Process functional commitments by continuing the support and processing of grants and contracts including the Payment Management System, grant processing, contractor payment, payroll, and grantee payment.
6. Provide Information Technology (IT) services for critical systems and databases, including maintaining the NIH network, computational infrastructure, and telecommunications, particularly as it relates to patient and animal care activities.
7. Provide Federal Civilian and Department of Defense agency emergency purchasing of IT products, services, and solutions capabilities by administering three Government-Wide Acquisition Contracts (GWAC) authorized by the Office of Management and Budget (OMB).
8. Launch a research response to newly emerging and reemerging public health threats.
9. Assist the advancement of medical and related sciences and to aid the dissemination and exchange of scientific and other information important to the progress of medicine and to the public health – to include providing reference and research assistance, making available bibliographic, reference, or other services to public entities, private entities, and individuals – and promoting the use of computers and telecommunications by health professionals (including health professionals in rural areas) for the purpose of improving access to biomedical information for health care delivery and medical research.
10. Ensure continued and effective communication with internal and external stakeholders including communications with the media; communications with HHS, NIH ICs and NIH satellite facilities; communications with research applicants, research grantees, and research contractors; and ensuring the coordination and release of public information messages, including maintaining the NIH Homepage.
11. Upon activation of the National Response Framework (NRF), the NIEHS may be activated by the Occupational Safety and Health Administration (OSHA) under the NRF's Worker Safety and Health Support Annex to provide a number of key functions. These include providing (1) training and technical assistance to instructional staff, curriculum development experts, subject-matter experts, and professional staff; (2) safety training to worker target populations with respect to the nature and location of the incident and the particular hazards; (3) assistance and support in the development and delivery of site-specific health and safety training through appropriately qualified WETP awardees' instructional staff; and (4) assistance such as respirator fit-testing and distribution of Personal Protective Equipment (PPE).

Appendix 2 – Sample Functions That Must Be Performed Onsite

Functions that must be performed on-site include, but are not limited to, the following:

- Provide Clinical Center patient care (e.g., all medical equipment and supplies, auxiliary power and pharmaceuticals required for inpatient care as described in the Clinical Center Pandemic Influenza Operational Plan)
- Preserve the health and safety of the NIH workforce
- Provide care to animals in NIH facilities
- Maintain scientific data (live or preserved, including unique biologic stock) and documentation (hard copy or electronic)
- Maintain the NIH mainframe and data center
- Provide minimal facilities support (i.e., emergency support)
- Maintain physical security, including the key card systems
- Provide food services (limited to services provided in Building 10)
- Provide IT support, particularly as it relates to patient and animal care
- Maintain critical facilities and grounds
- Provide logistical support (e.g., animal feed and bedding, the NIH fleet including first responder vehicles, IT equipment distribution)
- Ensure first responder readiness
- Ensure radio system operations

Appendix 3 – Sample Functions That Can Be Performed at Alternate Worksites

Functions which can be performed all or in-part at alternate worksites include, but are not limited to, the following:

- Communicate with the media
- Communicate with HHS, NIH, ICs and satellite facilities
- Communicate with research applicants, research grantees, and research contractors
- Coordinate and release public information messages (including the NIH Homepage)
- Provide acquisition activities as necessary
- Provide continued grant processing
- Provide legal services as necessary
- Ensure contractor payment
- Maintain the NIH Payment Management System
- Maintain and process payroll and benefits
- Ensure grantee payment