



Office of Research Services

FY2000 Annual Report

National Institutes of Health



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Annual Report **ORS FY2000**



ORS



*ORS Director,
Stephen A. Ficca*

It is with great enthusiasm and pride that I present the premier Annual Report for the Office of Research Services (ORS). This gives me the opportunity to share with you, our stakeholders, how your interests are being managed; our recent accomplishments on your behalf; and our exciting strategies and challenges of the future.

ORS is a component of the Office of Management in the National Institutes of Health (NIH), Office of the Director. As one of the largest organizations at the NIH, with about 1400 employees and six divisions, ORS provides a broad spectrum of services to the NIH—from architectural design to bioengineering, from environmental protection to printing and mail services. Although our services are

accountability at all levels for our operations and their results.

Further, ORS envisions itself as ONE with the NIH, an integral, essential part of the organization, and the across-the-board service provider of choice for the entire NIH community. We have established performance standards, ingrained staff expectations, and redesigned our service systems to ensure that your customer service experiences are of the highest quality. We have included in this Annual Report a pull-out ORS Service Directory listing our services and contacts. We hope that the Directory will make it easier for you to reach us and to secure the services that you need when you need them.

ORS is a central service center on the move. We are continually evolving—with more streamlined business practices and more efficiency; less bureaucracy and less redundancy.

Our vision is clear as we become ONE ORS.

Sincerely,

Steve Ficca



THE NEW ORS

Referring to ourselves as The New ORS is our way of framing our progressive thinking, planning and acting. ORS is a world-class, customer-focused service center that invests in our people, in technology and systems while creating a culture that embraces and thrives on change and all that jazz. Change embodies the vision and mission of ORS. We are committed to go beyond hit-and-miss innovation to a more systemic sustained approach to change at NIH. ORS is engaging the imagination and creativity of the entire ORS organization—as well as that of our Advisory Committees and the NIH at large to make continuous improvements and to live the values held by the NIH.

What's all that jazz? The results of change—the perceptions, resistance, denial, education, growth, acceptance, improvements, and reorganization; the adjustments and the readjustments.

As NIH changes, grows and develops as a global mega-organization, ORS responds by maintaining a high-level commitment to high quality performance and by integrating a consistent process of innovative change throughout the organization. We are in a constant state of planned change. We are changing the ways in which we:

- Do business;
- Relate to one another; and
- Relate to our customers.

We are NIH's primary provider of basic support services that are required for its programs to function and prosper, including:

- master planning, operating and maintenance of facilities, renovations and new construction;
- space management, facility management, conference services, housekeeping services;
- bioengineering and physical sciences research services;
- medical art and photography, comprehensive research library support, veterinary resources, scientific equipment maintenance and repair and instrumentations;
- occupational and radiation safety, environmental protection, occupational medical services, waste management and disposal;
- security and public safety, crime prevention, employee transportation services, parking;
- printing, travel, and mail services.

The Office of Research Services (ORS) activities directly and indirectly effect many organizations and people including NIH ICs and employees (scientific, administrative, and support staff), patients, volunteers, visitors, contractors and suppliers, providers of services (such as utilities, public transportation, rental space), other government organizations and agencies (FDA intramural programs, regulatory agencies, state and local governments, planning commissions), the surrounding neighborhood and the business community. The ORS has been responding to the needs and priorities of the NIH and IC management, NIH employees, and patients, by providing an exemplary physical and service infrastructure that will support new scientific challenges, strengthen the unique NIH research environment, and enhance the quality of life for all who come in contact with NIH.

At the NIH, there are five Central Service Office/Centers (CSOCs) that provide diverse services to the IC and to customers outside the NIH. [ORS is the largest of the 5 CSOCs] Because the CSOCs do not receive direct appropriations, their activities are supported through

The working

new approval and funding process for centrally furnished services. At the close of FY1998, the ORS, the Center for Information Technology, the Clinical Center, the Center for Scientific Review, and certain Offices in the Office of the Director were considered CSOCs. In 1998, the Deputy Director NIH convened a special working group to review the framework within which CSOCs operate and the manner by which MF taps is assessed and SSF costs recovered. The working group developed a principles document to address a new approval and funding process for centrally furnished services. [Myrna—I would add a sentence or two to say what they decided. It is the basis for our new funding model]

address a new approval and funding process for centrally furnished services

The portfolio of ORS services has been grouped into six basic categories (Services Hierarchy) [this list of 6 is not the Services Hierarchy—the SH is the long, detailed list]:

- Municipal Services
- Building and Space Acquisition and Development
- Property Management
- Program Support
- Regulatory Compliance
- Services Management and Support

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The ORS continues to evolve to support the NIIH mission. All the research support at the NIIH is now the responsibility of the ORS [I don't think this is entirely true]. In the near future, the ORS will also be able to provide acquisition services.[I don't think we want to say this—not politically cool. We should only state it when it becomes fact] Through the use of modern management tools, the ORS continues to strive to meet the NIIH community changing needs.

The New ORS Philosophy

The Office of Research Services (ORS) has an ongoing commitment to its NIIH customers and its own staff to build and sustain a work environment characterized by quality services, innovative approaches to service provision, along with responsible and accountable cost management. Our philosophy is to work across organizational boundaries within ORS and among other central service organizations to provide seamless service to our NIIH customers. ORS is committed to customer satisfaction by taking ownership and accepting responsibility and accountability for the level of service we deliver. ORS is striving to make a positive impact in every interaction with customers throughout the NIIH community.

ORS is dedicated to the welfare and the quality of the work life of its employees. To that end, we continually inspire our employees toward excellence and reward that excellence with the ORS Service Excellence Awards. (Expand; any more details about this; what are the criteria; what else is done to make life better for employees?)

ORS' management style is participatory. Employees at all levels contribute to the strategic planning and implementation of change initiatives. There is renewed recognition of the importance of our people, and of the talents and contributions of individuals to ORS' success. People seem to matter in direct proportion to an awareness of the challenges we face. ORS is encouraging all of our people to call upon their creative capacities in order to facilitate the positive changes being implemented and planned for ORS and for the NIIH.

Customer Service – Attitude is Everything

ORS realizes that customers are the most important people in our business. They keep us in business; without customers, there would be no need for us to exist.

Who are ORS' customers? The ?? ,000 employees of the NIIH, one of the world's foremost medical research centers and the Federal focal point for medical research in the U.S.

(Expand this section. Following are suggested sub-topics.)

- Improved Customer Communication
- Partnerships with Customers
- Accessibility for Persons with Disabilities

Business Philosophy Using Commercial Practices [need data] The Office of Research Services (ORS) has anositive impact in every interaction with customers throughout the NIH community.

Standards of NIH Practices [need data] The Office of Research Services (ORS) has an ongoing commitment to its NIH customers and its o.....the level of service we deliver. ORS is striving to make a positive impact in every interaction with customers throughout the NIH community.

Welfare and Worklife of Employees [need data] The Office of Research Services (ORS) has an ongoing commitment to its NIH customers and its own staff to build and sustain a work en.....e a positive impact in every interaction with customers throughout the NIH community.

Accomplishments 1: Advises and Represents

[needs to be edited] As recommended in the Arthur Andersen Study (AA) and by the [needs to be edited] AA Implementation Committee, eliminated overlapping functions by consolidating the Division of Space and Facility Management (DSFM) activities within the various other ORS organizations, and completed the transfer of Acquisition Branch-C from OA to ORS. Completed realignment of DSFM functions and employees by engaging management and employees in Transition and Workforce Planning Teams to ensure a smooth transition and equity for all employees. Using this same process, ORS not only moved the AB-C, but aligned the major ORS acquisition functions, AB-C, Lease Acquisition, and Procurement, within a new ORS Office of Acquisition Services. In conjunction with fulfilling AA recommendations, created an ORS/NIH Office of Facility Planning to ensure the future needs of the NIH research programs are met.

Represented the NIH in the development, negotiations and endorsement of a public-private partnership between NIH and PEPSCO Energy Services to finance, construct, and ultimately operate the largest and first of its kind co-generation power plant in the Federal Government. Prevailed in our efforts to develop innovative management approaches and effective business strategies to support the current and future NIH service and facility needs. Designed and implemented a multitude of system changes for ORS to successfully operate within the scope of the new NIH Business process for Central Services. While establishing new ORS SSF businesses and organizing and defining the ORS Services Hierarchy, we continued to work with key CSOCs to clarify each of our specific resources and build the associated framework necessary to support an activity-based budget concept. Created a Pro-Forma Statement of Services and took it to the ICs to show them the new verses the old way of doing business, including dollar comparisons.

Continued partnering with GSA, DOME (subsidiary of Johns Hopkins), and Bostonia Government Services to secure final State and Federal support to proceed with the Baltimore Replacement facility. Expanded and improved the managed parking service (NIH and Colonial Parking), adding parking capacity of about 1,000 cars despite loss of spaces due to ongoing construction. Enhanced the NIH Shuttle Program by redesigning the route network, stimulating ridership increase; route information accessible on interactive web site. ORS is recognized by ASHRAE and AIA as a national authority on research laboratories, animal facilities, and hospital systems. Supported ORS staff that produced the 15th national design guidelines on the efficacy of Ultraviolet Germicidal Irradiation and Ventilation in Removing Mycobacterium Tuberculosis Form Isolation. Received 2000 Federal Energy and

Water Management Award from the Federal Interagency Energy Policy Committee and DOE. Implemented a new budgetary support process whereby a comprehensive “Buildings and Facilities Plan” is developed to include project information necessary to prepare exhibits for OMB and to provide background congressional justification data; B&F Plan also included a proposed 5-year Funding Plan for building and facility requirements. Negotiated an MOU with GSA’s Federal Protective Service to perform criminal background checks on all prospective child care workers for the 3 NIH child care centers.

Joined NIH/DHHS/DOD/FDA/FEMA in national response and recovery programs (mandated by Presidential Directive and DHHS policy) such as the NIH Enterprise Recovery/Continuity of Operations Plan, National Critical Infrastructure Plan, and Joint Science and Technology Seminar 2000. Participated in the national “Leadership Conference: Biomedical Research and the Environment” co-sponsored by NIH and the NAPE. Continued to partner with Whitaker Foundation and the Foundation for NIH on the second year of the NIH/ORS Bioengineering Summer Intern Program within the DBEPS. Provided monthly briefings to the Core Community Group to keep employees,

with OCL to continue air quality alert procedures, improve landscaping, etc., and weekly campus tours for Director OCL. Prepared and maintained updates to inform the NIH and outside Community on major construction projects and other ORS activities through available information sources: ORS NEWS; TO USE, Weekend Advisory Report, Community Impact Advisory, ORS Web pages, Public Safety News Letter, and the NIH Catalyst. Collaborated with the NIDCD and other federal organizations in a national education campaign called “WISE EARS,” to prevent noise-induced hearing loss.

Provided representation and leadership to numerous NIH and outside prestigious Organizations and Committees: American Institute of Architects, National Research Council, Environmental Law Institute, Carnegie Mellon University (all on healthy workplace initiatives); DHHS ADR Forum; DHHS Customer Service Work Group, GPRA; Interagency Federal Childcare Council; Montgomery County Government: Emergency Planning Commission, M-NCPPC, Leadership Montgomery, Maryland Historic Trust, MD Department of Transportation and Environment, and Montgomery College Apprenticeship and Technical Training Committee; PEPCO, Washington GAS, and WSSC; and HRDDIU of MD Focus Group for SES/Exec. Represented the NIH on issues and actions effected by various state, local, and Federal regulatory agencies such as GSA, GPO, CJCP, OMB, WHO, FDA, NRC, CDC, and NCPC. ORS provided leadership/representation on the following NIH Committees: BECON, New Business Systems Steering Committee, OIG Lab Safety/Security, NIH/NNMCISuburban Hospital Steering Committee, Center for Scientific

Review Advisory Committee, Space Recommendation Board, IRM Council, Co-chair of NIH Leadership Development Committee, Labor Management Partnership Council, Parking Team, and the OMB Government Capitol Planning Workgroup. Served on several SES Search Committees for NIH.

Accomplishments 2: Provision of Services

[needs to be edited] Managed a \$950 million construction program to meet the current and projected research needs of the NIH. Completed approximately 400 major design/construction projects, 3,000 small renovations and maintenance projects, and responded to more than 150,000 trouble calls and preventive maintenance inspections. Projects being planned or designed: 23 megawatt Co-Generation Plant to be built in partnership with PEPCO Energy Services-expected completion 2003; Bldg 10 Revitalization Program Plan-15 years and \$1 billion to complete; Baltimore/Bayview Campus Lab Building; Central Vivarium; National Neuroscience Research Center; NIH Fire House; CC Family Lodge; and Building 6 renovation. Projects started, continued, and/or completed: Clinical Research Center; Louis Stokes Laboratories, Bldg. 50 (completion Feb. 2001); Dale and Betty Bumper Vaccine Research Center (completed Aug. 2000); Rocky Mountain Laboratory Upgrades; Bidg.37 Renovation; Building 2 Conversion to Offices (completed 2000); NIH Day Care Facility; North Electrical Substation; Power Plant Expansion, Bldg. 11 Chillers 22,23,24, and 25 producing 20K tons total cooling capacity. Established ORS/NIH steering groups to seek input from associated Interested customers: Building 50, CRC, Vivarium, NNRC, and Building 10 Revitalization. Awarded leases and supplemental lease agreements of more than 200,000 sq.ft. for state-of-the-art office and laboratory space, which included relocation of employees from 8 ICs to 36 locations; leased 18 apartment units to accommodate students associated with various NIH programs. Completed crucial relocation, including renovations and fitouts, of 120 NIDDK employees from the Natcher Building to Democracy 2 to provide on-campus expansion space for the National Center for Biotechnology Information. Completed closure process and transferred NIH ownership of the Caribbean Primate Research Center, Puerto Rico(PR), to the University of PR; and transferred NIH ownership of the William A White Building, St.Es to the D.C. Government.

Completed and/or improved ORS information technology systems to enhance user capability. Redesigned ORS web site improving access to ORS services. A new network-based access control system in design; developed and implemented web-based census collection through DHHS FIRM database, provided one real estate data set as a valid subsidiary record for real property audit; developed electronic leased space rent report to assist ICs in budget preparation; created

basic laboratory safety CD and an open-captioned one for hearing impaired. Implemented the following: E-delivery of full text journal articles; centralized animal procurement system (CAPS); Integrated Facility Management System; Commercial Printing Activity Online Reporting System; online directories for NIH mail; web-based request systems for requesting contract support services such as printing, mail, interpreting, and travel; created dedicated travel list-serv; web-based system to manage requests for shutdowns and automatic notification of IC staff; and ORS best practices web-based database. Expanded NIH Library services on a competitive fee basis to un-served members of the NIH Community and increased the number of scientific journals available over the NIH Library Web.

Partnered with the NIH, DHHS, to effect a successful Y2K operational facilities and public safety transition—no incidents reported. Endorsed participation in mass casualty incident/weapons of mass destruction drill (chemical release) at NNMC partnering with Fire and Rescue Companies from Montgomery County and NNM and Suburban, Holy Cross Walter Reed Army and NNMC hospitals; conducted the first successful Clinical Center Emergency Evacuation; administered TRANSHARE benefits to 2,300 employees; sponsored the first of its kind NIH

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energy conservation opportunities at the NIH on-campus buildings, and provided a 99.5% level of utility service to the NIH campus for steam, chilled water, electrical power and compressed air. Received and submitted in first half of 2000, 64 SJIDs to the Space Recommendation Board, 54 (91,000 nsf) for research space and 11(72,000 nsf) for administrative/extramural; advised and managed Director's Reserve space in Bldgs. 10, 49, 50 and the CRC to meet major NIH recruitment initiatives; ORS intramural component increased collaboration with ICs in areas such as Drug Delivery and Kinetics, Instrumentation and Research Development, Image Processing and Analysis, Molecular Interactions, Supramolecular Structure and Function, and Ultramicro Analytical Immunochemistry. Established Advisory Group to more effectively administer/implement the Elimination of Barriers to the Disabled Program. Successfully converted major contracts such as Food Service, Conference Services, and various maintenance contracts to performance-based contracts. For the third year assisted with the NIHComell Veterinary Student Leadership Program; showed strong ORS service presence at the NIH Research Festival, NIH Orientation Fair, and the NIH Quality of Worklife Fair. The ORS Advisory Committee contributed significantly to the new ORS Business model, namely, Services Hierarchy, Census Rent, Mandatory Services, Proforma Statement and Service Area Reviews. Completed new security standards and assessments for NIH campus facilities.

Provided improved customer service and safety throughout the NIH: implemented an NIH-wide ergonomics program; Nuclear Regulatory Commission inspection

*design; developed and
implemented web-based
census collection through
DHHS FIRM
database*

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completed with no violations identified; worked in cooperation with the intramural research program to decrease the use of radio nuclides through the implementation of alternative technologies, e.g., chemluminescence; revised the NIH Corridor policy and focused compliance on IC Safety Committees; 911 and 9-911 computerized emergency calling system improved to include automatic locator that pinpoints the exact location of the caller to building, floor and room; clustered mail boxes are 96% complete. Provided radiation safety training to 3,374 researchers; completed 9,000 laboratory compliance surveys, analyzed 28,738 analytical laboratory samples; and responded to 34,891 radioactive waste service requests. Recycled 1,980 tons of material, disposed of 8,069 tons of solid waste, collected 1,029 tons of MPW and 178 tons of Chemical Hazardous waste. Completed major maintenance and repair projects in support of regulatory and accreditation requirements and to meet life safety needs of the NIH. These included: upgrades in the Clinical Center to meet JCAHIO requirements, including fire wall and door repair/replacement and completed required maintenance on over 20,000 pieces of equipment; completed the modernization of Building 14B and the NIHAC Building 102 kennel wing HVAC system to maintain NIH's AAALAC accreditation; and to meet life safety needs completed the upgrade of the ACRF garage sprinkler systems and the repairs to the Building 10A wing ventilation system; and Asbestos abatement projects on the NIH campus and NIHAC mechanical rooms and public areas.

Accomplishments 3: Internal Controls

[needs to be edited] Ensured compliance with OMB circular A-123, Internal Control Program, and related NIH and DHHS policies. Generated internal control and vulnerability reduction systems and processes to ensure correction, improvement, and adjustment to current systems that will safeguard the maximum effectiveness of each internal control initiative. Continued to revise and/or establish ORS policy, procedures and/or guidelines to ensure the use of resources is consistent with laws, regulations, and policies that protect against waste, loss, and misuse.

Lead trans-NIH team (CIT, CC, NCI, NIAID, and NHLBI) and ultimately partnered with DHHS, in efforts to select and deploy an NIH "enterprise" facility information management system that enable approved users to enter, store, query, view and export alphanumeric and graphic data-by partnering with DHHS, the NIH saved more than \$500,000 in software purchase costs. Continued to explore ways to reengineer and improve business processes to reduce or eliminate hard-copy recurring reports such as FTE reports and positions ceiling reports. Revised the process for inspection and oversight of

guard contract and established regular inspections for all posts; negotiated an agreement between the NIH and the Fraternal Order of Police and through the process established a Management-Labor Relations Committee to help improve union and management partnership; coordinated a major up grade, over a \$100,000 worth of improvement, of campus wide CCTV surveillance system; developed a new internal investigation format/delegation of authority/employee rights and recording system; improved security by developing a group retention allowance that has stopped the high rate of NIH Police Officer turnover. Saved \$320,00 in postage costs and handling fees by partnering with Franchise Business Activity-East, Treasury Dept.. for bulk processing of foreign mail-well beyond anticipated savings; continued to meet one-day delivery standard for interoffice mail; established on-line directories and reporting mechanisms that realize more than \$6,000 yearly in person hours saved; succeeded in meeting all recommendations of the OIG audit of NIH Printing Program CY 1998—file closed.

Participated in PEPCO's energy rebate program implementing energy efficient processes anticipated will achieve at least \$2M in rebates; received two

Federal Interagency Energy Policy Committee and the DOE. Continued

bottom-up cost studies using activity-based analysis and market analysis to modify rate structure in accordance with FY00/00 ORS Business Plan; developed service invoice that provides customers with detailed labor hours, parts and materials, and assists customers in repair or replace decisions. Completed performance-based contracting course for ORS project officers and OD contracting officer.

Focused efforts on internal controls for the ethics function by establishing and administering an ethics orientation for new employees, including a brief film and overview of the Standards of Conduct. Supported NIH's awareness of ethics and internal controls by providing ORS employees reminders, clarification, assistance, and guidelines on conflict of interest in areas such as outside activities, official duty activities, acceptance of gifts and awards from outside organizations, and waivers-recusals. Completed Confidential Financial Disclosure Reports and ethics training for 300 employees, including new EODs. Developed or revised four NIH Manual Issuance Chapters: Handling and Safeguarding of Controlled Substances for Nonhuman Use, Introduction of Rodents and Rodent Products, Dissemination of Security Related Information, and Guidelines for Accepting Donated Trees. Created, revised and/or deleted policies, procedures, guidelines to eliminate redundancy and to adjust for new redelegation of authorities from the DHHS to NIH to the ICs. Current and future procedures have and will be rewritten for easier understanding in step-by-step instructions. Document Imaging System (DIS) installed to manage Freedom of Information Act

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 ACCOMPLISHMENTS

Requests, and other areas as such as OGE 450 (Confidential Financial Disclosure Reports), Management Control Reviews, and ORS and NIH policies. DIS provides an easy more effective and efficient way to collect, create and deliver relevant, timely, readily accessible data and information. Worked with the NIH FOIA office in response to a number of large and sensitive FOIA requests, and continued to work with OAIOMA to update NIH Delegation of Authorities data base.

Conducted annual review of Delegated Examining Authorities to ensure compliance with procedures: Recruitment, Application Processing, and Certification/Selection—overall outcome was favorable. ORS was a key member of the NIH Board of Survey to reconcile capitalized and non-capitalized equipment during the property inventory. Collaborated on NIHDIHIS initiative to improve worker's compensation claims. Conducted monthly audits according to the IS09000 procedures to identify areas needing improvement, and implemented the Project Information Network for use in managing projects—schedule and cost tracking, document and workflow management, and timecard module for tracking fee-for-service billable hours.

Accomplishments 4: Equal Employment Opportunities

[needs to be edited] The ORS consists of more than 1300 employees, over 56% are minorities and women. Of the 184 supervisors and managers, 93 (50%) are minorities and women, an increase of 19% over FY99. Of the 224 GS/GM 13-15 positions, 136 (56%) are minorities and women; of the 215 promotions, 192 (89%) were minorities and women, an increase of 8% over FY99; of the 104 new hires, 89 (86%) were minorities and women, an increase of 12% over FY99. Workforce Environment: Following the new ORS Affirmative Action Plan, ORS was able to meet realistic recruitment goals resulting in an increase in the number of minorities and women in under represented areas. ORS workforce profile highlights the hiring of: a GS-15 Black male for Chief of the Scientific Equipment Branch; a GS-15 Hispanic Male for Assistant Director; a G-15 non-minority female for Assistant Director for Facilities Planning; a GS-14 Black male for Chief of Police; 3 GS-14 non-minority females; a GS-13 Asian male for General Engineer; a WS-15 Black female for Chief, Building Services; a CC-04 non-minority female as a Senior Scientist. Promotion highlights include a non-minority female, GS-15; 2 Black females, GS-14; an Hispanic female, GS-14; a Black male to Facility Management Officer, GS-14; a Black female to GS-13; a Black male to GS-13; 3 non-minority females to GS-13. Also, 1 non-minority female received a temporary promotion to a GS-14. Increased minority representation on NIH Police Force, hired 1 Black female Lt. and promoted 1 Black male to Capt. Worked closely with EEO Officer to provide a strong

proactive approach to problem solving and conflict resolution resulting in 33 EEO resolutions through dismissals, withdrawals, settlements, and/or MOU's, or 43% versus 21 % in FY99, leaving 43 cases in FY00. Developed and implemented an ORS EEO Complaints Data Base for use by Division Directors. Implemented a comprehensive work-force planning strategy to support about 90 ORS employees (the majority of whom are minorities and women) effected by the consolidation of space and facility management functions within ORS. This strategy included establishing employee-based transition teams to guide the functional consolidations; professional assistance in developing resumes and preparation of KSAs; COTAs; an ORS Job Fair; and a Priority Consideration Program for ORS vacancies/recruitments, as well as other IIR assistance and approaches. Strengthened lines of communication through annual Town Meetings and quarterly leadership Meetings, Director's news letter, and ORS global messages. Responsive to reasonable accommodations requests, ranging from light duty assignments for short term injuries to renovating office space for chronic health problems to special equipment for employees with hearing or visual impairments. Continued to support the ORS Center for Alternative Dispute Resolution (CADR). The

cases is estimated to be about \$650,000. CADR provided assistance to ORS/NIH HRB, OEO; NIH Ombuds Office; other federal agencies, and more recently, ORS/construction contractor partnering mediation. Training, Recognition, and Employee Development: Demonstrated a strong commitment to employee development by endorsement of fair and equitable training, recognition, and promotion programs while implementing the goals and objectives of affirmative action and targeted recruitment. Of the 861 ORS employees taking training, 42% were minorities and 15% were non-minority females, using 61% of training funds. Developed career ladders for ORS Facility Managers, Engineering Technicians, Parking Office Positions, and conducted Engineer/Architect Position Study. To improve management and technical skills of VRP staff, created a VRP University. Initiated Prevention of Sexual Harassment Training for all ORS managers and employees. Increased resources to the ORS CCR to provide career counseling for 63 employees, skills and career transition assessment to 54 employees, and a wide range of training in 53 courses and 21 technical and speciality courses, totaling more than 3,000 training participants. Managed the ORS/NIH Apprenticeship Program (now in its 22nd year), which continues to be a successful career development and advancement avenue for upward mobility; participation this year was more than 85% minorities and 6% women. Recognition: 47 honorary individual and group awards went to 175 ORS employees: NIH Merit Award, 14 individuals and 9 groups (64 employees); ORS/ EEO Award, 1 individual; NIH Quality of Worklife, 1 individual; ORS Service Excellence, 3 individuals and 6 groups (48

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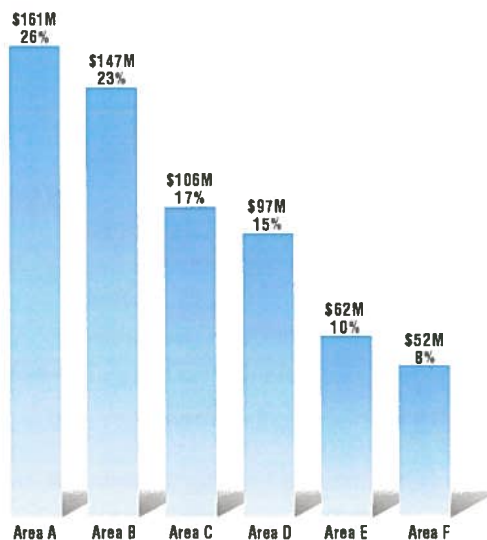
employees); NIH Director's Award for Mentoring, 1 individual; NIH Director's Award, 4 individuals and 5 groups (32 employees). Commissioned Corps Recognition: Outstanding Service Medal, 1 individual; Commendation, 5 individuals; Achievement Medal, 1 individual. Targeted Employee Development: Supported employee development for 3 Presidential Management Interns (PMI) Program and 1 ORS Hispanic Female is on the NIH Management Cadre Program. Provided several Career Opportunities Training Agreements (COTA) for employee advancement. Managing Diversity Programmatic Activities: Established an ORS Committee to develop ORS Diversity Principles that were presented to the 184 members of ORS Leadership Group with strong emphasis placed on expected outcome/benefits. ORS is represented on the NIH Diversity Council, and is working with the NIH Diversity Catalyst. Continued strong leadership in support of the Secretary's Hispanic Agenda for Action (HAA) initiatives by meeting hiring goals for FY2000, and establishing recruitment goals through FY2002. Provided financial support to the NIH OHRM to develop an NIH-wide recruitment data base. Other activities include: 1) Continued the 6-year academic collaboration with the Howard University School of Architecture hosting Career Day at Howard University; in addition to the six major design projects already completed, initiated the design of clinic space for NIAMS at Upper Cardoza Health Center, Washington, DC, in addition, ORS assisted HU with establishing a graduate program in Architecture, specifically focusing on research facilities. 2) Continued to administer the NIH Interpreting Services Program through a performance-based contract that provides a wide-range of interpreting (sign language, tactile, oral, etc.) ranging from 1-on-1s to scientific conferences and lecture. Additional D/HH initiatives include closed caption video-tape for safety training and implemented TTY 911 service. 3) Participated in Take Your Child to Work Day providing activities ranging from Fingerprinting children, performed by the Police, to a demonstration on Radioactivity. 4) Continued to support the HHS Secretary's Employee of the Month program by rotating selection throughout ORS Divisions. 5) Hired Minority student intern to work in the DBEPS Admin. Office. 6) Continued bioengineering summer internship program for 16 biomedical engineering undergraduates; and mentored 5 additional students in the DBEPS NIH summer intern program.

Our Financial Picture

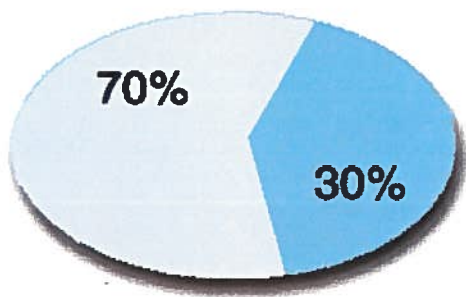
[need data-came from Web site] The ORS represents one of the largest organizations at the National Institutes of Health (NIH), employing approximately 1,400 people. ORS is NIH's primary provider of basic support services that are required for NIH programs to function and prosper, including:

- Master planning, space and facilities planning
- Space and facility management and maintenance, building renovation and construction, utilities management, custodial services
- Biomedical engineering and instrumentation resources
- Occupational and radiation safety, environmental protection, occupational medical services, waste management and disposal
- Security and public safety, crime prevention, employee transportation services
- Mail and printing services, management of food, travel, interpreting, child care, fitness service

REVENUE BY BUSINESS AREA



**ORS
FINANCIALS**



Budget Breakdown

contracts and other employee amenities.

ORS activities impact directly and indirectly many organizations and people including NIH ICs, scientific, administrative, and support staff, patients, volunteers, visitors, contractors and suppliers, providers of services (such as utilities, public transportation, rental space), other government organizations and agencies (FDA intramural programs, regulatory agencies, state and local governments, planning commissions), the surrounding neighborhood and the business community. ORS must respond to the priorities of the NIH and IC management, NIH employees, and patients by providing an exemplary physical and service infrastructure that will support new scientific challenges, strengthen the unique NIH research environment, and enhance the quality of life for all who come in contact with NIH.

What Does ORS Do?

The NIH is much like a small town with its own utilities, hospital, library, mail facilities, and police and fire departments, all of which are managed within the NIH, under the Office of Research Services (ORS). The ORS's role is similar to that of a city government; it manages many of the resources and municipal services necessary to support biomedical research, the primary focus of NIH.

A few examples demonstrate the scope and significance of ORS activities. The ORS:

- Handles approximately 33,000 pieces of US Postal Service mail daily, the same as the Post Office in the town of Olney, Maryland.
- Maintains: 10 1/2 miles of roads over 15 miles of sidewalks over 42 acres of surface parking lots and 30 acres of garage parking areas 168 acres of lawn, 12 1/2 acres of shrub and flower-beds.
- Collects, transports and arranges for the appropriate disposal of tens of thousands of metric tons of solid waste each year and supports an extensive recycling program.
- Installs and maintains large utility distribution systems that provide electricity, steam and chilled water to campus facilities. (The NIH is PEPCO's largest single customer consuming roughly 360 million kilowatt-hours of electricity yearly.)
- Provides oversight of a number of "employee amenities", including cafeterias, on-campus housing, day care centers, a bank, a credit union, a barber and beauty shop, a Recreation and Welfare Association, and two fitness centers.
- Undertakes, on behalf of the NIH and the surrounding community,

comprehensive environmental and master planning to guide future campus development.

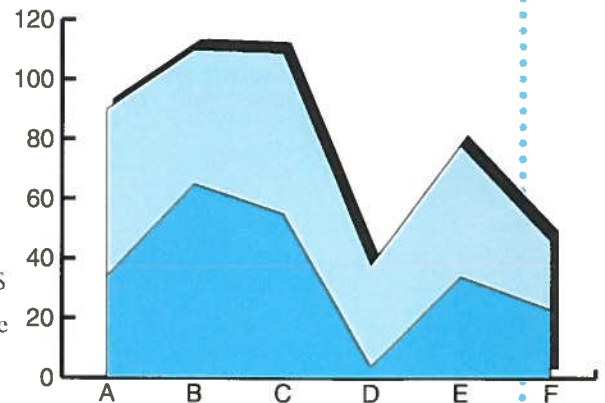
- Functions as “owner and facility manager” of the more than 100 NIH-owned and leased facilities in the Bethesda/Rockville/ Poolesville, Maryland; Rocky Mountain Laboratories, Montana; and NIEHS, Research Triangle, N.C. Between 1991 and 1999, ORS acquired more than 980,000 square feet of off campus rental space. As “owner and facility manager,” ORS provides large numbers of professional, technical, support staff and other resources for building operation, maintenance and repair, housekeeping, and space management services.
- Plans and directs the ambitious construction and renovation program for buildings and campus utility systems, and the addition of seven major new facilities through the year 2002.

For Placement Header

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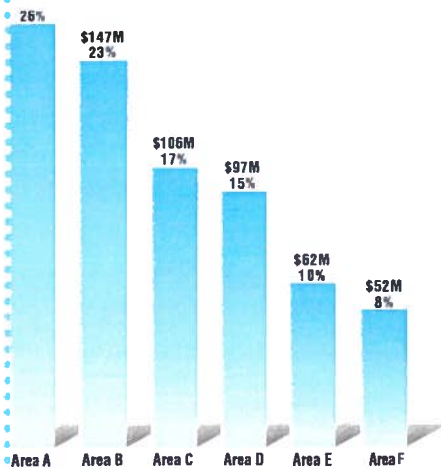
assistance to ORS/NIH HRB, OEO; NIH Ombuds Office; other federal agencies, and more recently, ORS/construction contractor partnering mediation. Training, Recognition, and Employee Development: Demonstrated a strong commitment to employee development by endorsement of fair and equitable training, recognition, and promotion programs while implementing the goals and objectives of affirmative action and targeted recruitment. Of the 861 ORS employees taking training, 42% were minorities and 15% were non-minority females, using 61% of training funds. Developed career ladders for ORS Facility Managers, Engineering Technicians, Parking Office Positions, and conducted Engineer/Architect Position Study. To improve management and technical skills of VRP staff, created a VRP University. Initiated Prevention of Sexual Harassment Training for all ORS managers and employees. Increased resources to the ORS CCR to provide career counseling for 63 employees, skills and career transition assessment to 54 employees, and a wide range of training in 53 courses and 21 technical and speciality courses, totaling more than 3,000 training participants. Managed the ORS/NIH Apprenticeship Program (now in its 22nd year), which continues to be a successful career development and advancement avenue for upward mobility; participation this year was more than 85% minorities and 6% women. Recognition: 47 honorary individual and group awards went to 175 ORS employees: NIH Merit Award, 14 individuals and 9 groups (64 employees); ORS/ EEO Award, 1 individual; NIH Quality of Worklife, 1 individual; ORS

Operating Expenses



ORS
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ORS Revenue



Service Excellence, 3 individuals and 6 groups (48 employees); NIH Director's Award for Mentoring, 1 individual; NIH Director's Award, 4 individuals and 5 groups (32 employees). Commissioned Corps Recognition: Outstanding Service Medal, 1 individual; Commendation, 5 individuals; Achievement Medal, 1 individual. Targeted Employee Development: Supported employee development for 3 Presidential Management Interns (PMI) Program and 1 ORS Hispanic Female is on the NIH Management Cadre Program.

The ORS CADR, established in FY 1996, received and mediated 80 cases in FY00, and effectively resolved 30 interpersonal conflicts, including labor union disputes as well as administrative grievances; savings associated with resolutions of these cases is estimated to be about \$650,000. CADR provided assistance to ORS/NIH HRB, OEO; NIH Ombuds Office; other federal agencies, and more recently, ORS/construction contractor partnering mediation. Training, Recognition, and Employee Development: Demonstrated a strong commitment to employee development by endorsement of fair and equitable training, recognition, and promotion programs while implementing the goals and objectives of affirmative action and targeted recruitment.

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	Operating Budget	Residual Budget
Research	\$275,087	\$298,569
Support Contracts		
Scientific Evaluation Grants	3,528	3,742
Research Resource Grants	19,437	21,338
Construction Conference Grants	3,000	3,000
Research Management & Support	901	1,101
	108,965	110,065
TOTAL	\$410,918	\$437,815



CHALLENGES

Key Targets

Wherever there are changes, there are challenges. We know that from experience. As ORS moves from a bureaucratic to a less cumbersome business structure and culture, there are numerous challenges to be overcome. Changes in business practices, such as pricing structures, present their own particular set of challenges. It is incumbent upon ORS to provide the necessary leadership to keep our NIH customers informed, to educate them and to collaborate with them to facilitate acceptance and incorporation of new business practices. That is exactly what ORS is currently doing; that's what we are prepared to continue doing as we continue to face and overcome challenges.

In response to an NIH decision to change the way budgets are set for Central Services Organizations, ORS rolled out its New ORS Business System in 1997 and has, since that time, implemented portions of the System in a methodical way. The New ORS Business System represents a completely revamped way of seeing and serving the NIH. It is a System built on current commercial best practices in pricing and service provision. The New Business System incorporates activity-based management and costing as a means of defining services, obtaining funding and developing new fee structures for the services offered. Some of the services are mandatory, while others are fee-based; some permit the NIH community members to select ORS or outside vendors as service providers. (Expand)

ORS anticipates full implementation of the New Business System during the current fiscal year. ORS understands that successful implementation of the New Business System is directly related to customer mindset, acceptance and support. The System is designed so that both internal ORS customers and external NIH customers get what they pay for from ORS, and pay only for what they get. Our goal is to itemize every discrete service and eliminate over- and under-payments, while keeping all customers apprised of the changes as they occur. We are seeking sustainable gains in bottom-line performance and interpersonal effectiveness.

(Expand – what other challenges are anticipated?)

Despite the challenges we face, ORS is confident that at the end of the day, ORS will be the recognized authority for the provision of cost-effective excellent, central services for the NIH community. We will work in concert with all of the Clinical Center, the Center for Informational

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ORS is comprised of the Office of the Director and six (6) Divisions:

- Division of Bioengineering and Physical Science
- Division of Engineering Services
- Division of Intramural Research Services
- Division of Public Safety
- Division of Safety
- Division of Support Services



Office of the Director

Mr. Stephen A. Fava, ORS Director and NIH Associate Director for Research Services

The Office of the Director (OD), ORS, provides leadership, direction, quality development, and overall management of ORS in striving to meet NIH program objectives and goals. The OD establishes and implements policy, acquires and allocates resources to meet NIH goals, and represents and promotes the ORS and the NIH. The OD also coordinates activities of the ORS Advisory Committee.



Office of Administrative Management

Ms. Jan Maltbie, Acting Executive Officer, ORS

The Office of Administrative Management (OAM) directs, coordinates, and conducts administrative management activities of the ORS by providing assistance in the areas of personnel/human resource management, procurement, ethics, outside activities, and management and program analysis. The OAM advises the ORS Director and the ORS Division Directors on developments in administrative management and their implications and effects on program management. The OAM develops policies on administrative management and prepares and issues procedures and guidelines for implementation of administrative policies, delegations, and requirements. The OAM serves as the ORS focal point for the coordination, preparation, and analysis of a wide variety of administrative management reports and other documents associated with the NIH and DHHS.



Office of Business Systems and Finance

Mr. Leonard Taylor, Jr., Director

The Office of Business Systems and Finance (OBSF) advises the ORS Director and ORS Division Directors and operational managers on matters involving business and financial management, budget formulation and execution, and information technology. OBSF assist the Divisions with the management of the B&F appropriation, the Management Fund and the Service and Supply Authority accounts. OBSF is responsible for the conceptualization and development of financial models through which the ORS provides services to the NIH community. OBSF manages information technology for the ORS. This encompasses planning and operation of the ORS wide area network, development and support of enterprise information technology applications, and information technology planning, policy, and strategic management.



Office of Quality Management

Mr. Antonio Rodriguez, Director

culture in customer service and customer and employee satisfaction; promotes quality development initiatives across ORS; and serves as the focal point for ORS streamlining initiatives aimed at achieving downsizing targets and achieving customer satisfaction through continuous process improvement, reengineering and other organizational quality improvement methods.



Office of Equal Employment Opportunity

Ms. June Johnson, Equal Employment Officer

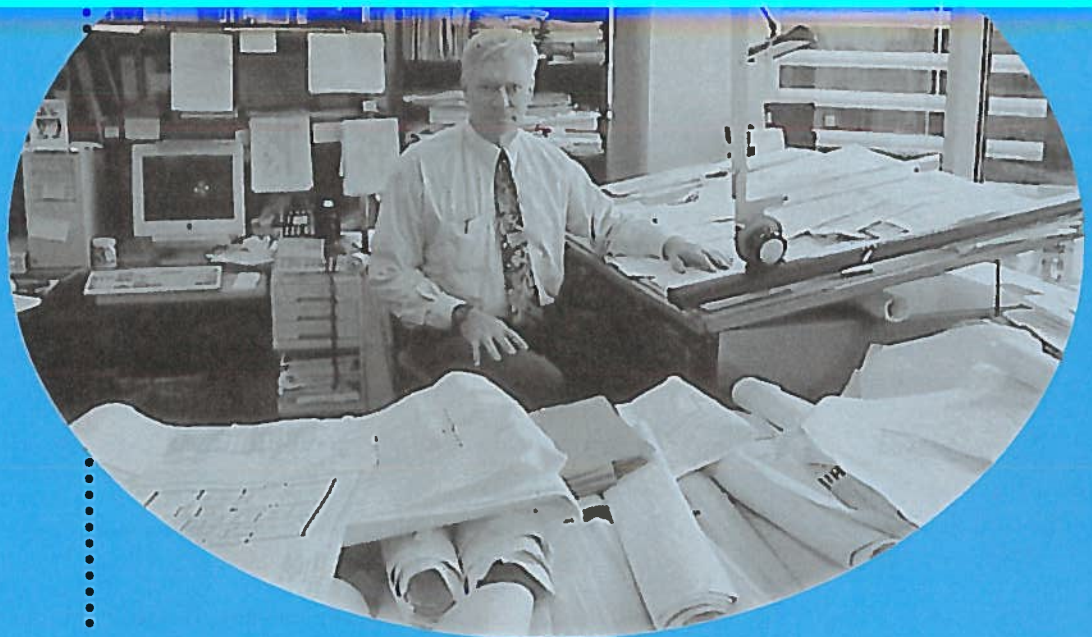
The Office of Equal Employment Opportunity (OEEO) advises the Associate Director for Research Services; Executive Officer; ORS Division Directors; and staff on matters related to the EEO programs and policies of the NIH. The OEEO plans, coordinates, provides policy direction, monitors, and evaluates the execution of the ORS EEO Program, including the Hispanic Employment Program and the Program for Persons with Disabilities. The office provides program leadership and coordinates with the Personnel Management Branch and other ORS elements on the development and implementation of the ORS/Affirmative Action Plan and implements the ORS Precomplaint Process. The OEEO represents the Associate Director for Research Services and the Executive Officer at meetings regarding EEO issues, participates with other organizations in the development of EEO data, and works closely with the Office of Equal Opportunity, NIH.

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Office of Planning (proposed) ☞

Vacant

The Office of Planning advises the (SPELL OUT) ADRS, and NIH management on facilities planning issues; develops related policies and procedures; and provides staff support to the NIH Space Recommendation Board and Facilities Planning Board. It provides short- and long-range planning for all NIH controlled campuses and facilities, including leased facilities. It is involved in the development of an NIH facilities strategy and plan to address current and emerging mission requirements, including intramural research and extramural science administration, and other NIH business-related activities needed to support the NIH science mission. The Office oversees the development and implementation of NIH master plan(s). It provides expertise in transportation management, develops the NIH Transportation Management Plan, and directs and oversees the implementation and coordination of transportation initiatives. The Office provides specialized NIH facilities planning and consulting services to include historic preservation, facility assessment, and architectural barriers compliance programs. It manages the facilities-related environmental planning and energy conservation programs for all NIH controlled campuses and facilities, and oversees a coordinated approach among the ORS divisions and ICs. It develops and manages the Annual NIH Buildings and Space Programs, which includes the NIH Buildings and Facilities (B&F) Plan and the NIH Leased Space Plan, the 5-Year Federal Capital Improvements Program, the Capital Planning Program, and other related requirements, including budget and space planning documents, implementation schedules and estimates, and other related documentation needed to identify programmatic needs, objectives and technical requirements for all new construction, major facility renovation, and major lease acquisitions. Guidance is provided to the NIH community in assessing space needs. The Office administers Space Justification Documents. It conducts facilities planning coordination within ORS, and provides liaison with the NIH employee community and other NIH entities, including but not limited to the Office of Communications and the Office of Community Liaison, as well as federal, state, and local agencies and community organizations. The Office oversees ORS generated activities that impact the use, appearance and environmental quality of NIH controlled campuses and site facilities.



*Engineer Dave Davidson
from the Division of
Engineering Services with
blueprints of upcoming con-
struction projects for the
NIH campus.*

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*John A. Smith,
Director*

Bioengineering and Physical Science Program

The Bioengineering and Physical Science (BEPS) Program contributes to the advancement of NIH research by the application of engineering, mathematics and the physical sciences to the solution of problems in biology and medicine. This is done through:

- Consultations and collaborative research with NIH intramural scientists in the areas of measurement, imaging, mathematical analysis and modeling, and the design of specialized research protocols and equipment;
- Proposing and developing theoretical and experimental methods, including novel instrumentation to meet long-term needs of the NIH Intramural Research Program; and
- Serving as a liaison to other NIH and non-NIH organizations with bioengineering and physical science expertise to obtain and disseminate information on technological resources and developments applicable to NIH intramural research problems.

The Office of the Director provides leadership and expertise in the development and application of bioengineering and physical science technologies to research problems of importance to the NIH Intramural Research Program, and plans and directs the activities of the BEPS program. The Administrative Services Section provides administrative and management support for BEPS. The professional staff are grouped into five Resources, with specialized expertise to support the Intramural Program of NIH through consultations and collaborative research and development projects:

- Drug Delivery and Kinetics Resource (pharmacokinetics, regional drug administration, spatially distributed models, analysis of biochemical networks, fluid mechanics);
- Image Processing and Information Analysis Resource (advanced biomedical imaging processing and information analysis algorithms);
- Instrumentation Research and Development Resource (conception, design, development, and evaluation of innovative scientific instruments and systems);
- Molecular Interactions Resource (biophysical characterization of systems of interacting biological macromolecules); and
- Supramolecular Structure and Function Resource (quantitative methods for determining the organization and composition of supramolecular assemblies and small cellular organelles).



Division of Engineering Services

The Division of Engineering Services (DES) provides architectural, engineering, technical and craft services for the operation, maintenance, alteration, repair, and development of the NIH facilities to ensure the existence and integrity of the physical environment necessary to support the NIH mission. IC and facility program planning, work request tracking, customer liaison, and advocacy roles are provided by DES.

The DES is responsible for planning, programming, designing, constructing, operating and maintaining all clinical and laboratory buildings and support facilities on the Bethesda and Poolesville campuses, including the Clinical Center, a multi-bed research hospital. This includes a sophisticated infrastructure that consists of complex central plant equipment and utility distribution systems. Further, the DES is responsible for all aspects of the buildings' support systems and operations affecting NIH intramural research animal facilities. The maintenance of these facilities is critical to the research protocols and the overall



*John B. Jones,
Director*

In addition to the main NIH campus in Bethesda and the NIH Animal Center, Poolesville, MD, the NIH facilities management and technical engineering programs provide direction and support for eight satellite components located throughout the United States. The DES provides national leadership in biomedical research facility design and operations and thus impacts on the conduct of biomedical research at medical centers throughout the United States.



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Division of Intramural Research Services



*Sarah A. Smith,
Director*

The Division of Intramural Research Services (DIRS) plans and conducts a centralized program of intramural research services for the NIH throughout the planning, performance, and reporting of research projects.

The Scientific Equipment and Instrumentation Branch provides design and fabrication of custom instrumentation and the maintenance, modification, repair, sale, and lease of scientific equipment and scientific workstations. The Scientific Equipment and Instrumentation Branch offers labwide maintenance agreements and can provide equipment on short-term or long-term agreements.

The Library Branch provides comprehensive research and information management support to NIH scientific, clinical and management programs through an extensive collection of books and journals, access to electronic information resources, staff assistance, and instruction program, and consultation on information handling and retrieval.

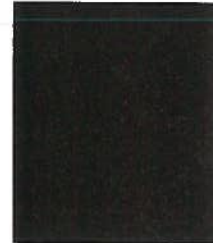
The Medical Arts & Photography Branch provides information design and production services in traditional and electronic media. Branch capabilities encompass a broad range of media and techniques including graphics; presentations; exhibitions; public relations, portrait, documentary, and scientific photography; medical illustration, fine art illustration, multi-media and video production; and electronic interfaces. The Medical Arts and Photography Branch exists to help the NIH community with documenting and communicating NIH research findings and program information.

The Veterinary Resources Program provides a centralized laboratory animal care and use program offering comprehensive veterinary, animal husbandry, and diagnostic support services. The Veterinary Resources Program operates a veterinary pharmacy, an animal transportation service, animal surgery, breeding and cryopreservation, and pathology services. It provides housing and the associated routine and clinical care, nutrition and enrichment and for rodents, rabbits, cats, canines, ungulates, primates, and fish.



Division of Public Safety

The Division of Public Safety (DPS) plans, coordinates, and evaluates a comprehensive protection, security, and emergency management program for the National Institutes of Health. The program includes the development of criteria relating to: (1) the protection of life and property, (2) physical security, and (3) emergency preparedness matters in order to eliminate or control vulnerabilities encountered in the construction, operation, and maintenance of NIH health care and research facilities on- and off-campus. The DPS serves as a focal point for the receipt, transmittal and disposal of classified documents. The DPS maintains liaison with public, private and academic law enforcement, fire protection, and emergency planning agencies at the international, national, state and local levels. The DPS provides technical assistance, education, training, and dissemination of public safety information to the NIH community in all matters relating to personal and physical security, law enforcement, fire protection, fire prevention, and emergency preparedness issues. The DPS manages Government



*Mr. O.W. (Jim) Sweat,
Director*

including car pooling and vanpooling and administers the Transhare program, a subsidy program encouraging the use of public transportation.

The Division is comprised of three branches. The Police Branch (PB), with exclusive jurisdiction, administers a complete law enforcement protection program on the NIH enclave; conducts initial and follow-up investigations of all crimes occurring on the NIH enclave; makes criminal and traffic arrests; prepares cases for presentation, and provides testimony to the Federal courts; enforces all relevant Federal, state, and local laws.

The Crime Prevention Branch (CPB) is responsible for conducting security surveys of all NIH installations and buildings to ensure the adequacy of physical security measures and to detect physical security hazards; conducts physical security design reviews for all construction and renovation projects on and off campus; provides security programs for off-campus facilities and manages all contract guard services; administers a complete parking program for the NIH, issues parking permits, all U.S. Government identification cards, government driver's licenses, and TRANSHARE commuter cards. In addition, the CPB provides a complete key control system, installs and repairs all key-operated locking devices on the NIH campus and leased facilities.

The Emergency Management Branch (EMB) provides state-of-the-art responses to fire, rescue, and medical emergencies as well as to all chemical, biological, radioactive materials, and mixed agent releases on campus. Conducts technical



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fire investigations; inspects, maintains, and fills all fire extinguishers and provides training in their use; issues "hazardous work" (open flame) permits for all welding, cutting, and other open flame operations on campus; conducts fire protection engineering design reviews, contractor submittal reviews, construction inspections, and final fire alarm (detection/suppression) system acceptance tests for all construction and renovation projects on campus. EMB also develops emergency plans for all NIH facilities; manages the NIH Occupant Evacuation Plan for on- and off-campus buildings and conducts building evacuation drills; serves as the NIH liaison with local, state, and other Federal agencies in all matters relating to emergency response and preparedness and establishes and maintains plans for the continuity of operations and recovery in the event a natural or man-made disaster (including terrorism) impacts NIH facilities.

Division of Safety

The Division of Safety was established as the first organization providing comprehensive safety and health services to all Institutes and other organizations located on the Bethesda campus. This was stimulated by laws and regulations and executive orders that are being issued concerning the environment, hazardous substances and workplace safety.

The Office of the Director is responsible for providing policy and management guidance to four Branches and for coordinating all Division activities. The Occupational Medical Service (OMS), a contract operation, provides a wide variety of employee health services and is monitored by the Office of the Director. The Radiation Safety Branch (RSB) provides services to support and control the use of radioactive substances by clinical and research personnel at NIH under the rules and regulations specified by the Nuclear Regulatory Commission. The Occupational Safety and Health Branch (OSHB) provides



*Charles B. Smith,
Director*

operations. The Environmental Protection Branch (EPB) provides services and technical assistance to assure that biomedical and clinical research at NIH safeguards the public health, protects or enhances the quality of the natural environment and conserves natural resources as far as possible. The Media and Glassware Services Branch (MGSB) provides necessary glassware services and specialized media to the NIH Intramural Research Program.



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Division of Support Services



*Mr. George A.
Mendez, Director*

The Division of Support Services (DSS) is the provider of printing/reproduction, mail services, interpreting services and travel management services for the NIH, serving more than 20,000 customers located in more than 60 buildings throughout the NIH campus and the surrounding areas. The Division is comprised the Office of the Director, and two branches, the Reprographics Communications Branch, and the Mail and Courier Services Branch.

The Office of the Director (OD) provides leadership and oversight. This office is an advisory staff for its branches and acts as a senior advisor to the ORS executive management on all issues related to ORS-wide business activities. The OD activities include building management, budget coordination, administrative leadership and support, computer planning and support, employee retraining, and contract administration, oversight and support. The OD has also assumed the responsibility for the NIH Travel Management Center Contract and Interpreting Services for NIH.

The Reprographics Communications Branch (RCB) provides printing and related services. These activities include procuring printing and related requirements from the Government Printing Office (GPO) and commercial sources; developing printing technical specifications, determining most economical method of production, estimating costs, and negotiating and establishing production schedules; providing technical advice, guidance and assistance to NIH program areas on printing matters including cost effectiveness, interpretation of regulations and policies, and developing printing formats; performing press sheet inspections at contractor facilities on complex or multi-color printing jobs; providing computerized mail lists, labels and distribution services; providing high volume duplicating services through management of central and satellite facilities; and providing copying services in both on- and off-campus copy centers.

The Mail and Courier Services Branch (MCSB) provides all mail services to the NIH ICs. These activities include receiving and processing incoming and outgoing mail; picking-up and delivering mail to 1,000 mail stops twice daily; dispatching domestic and international mail; metering outgoing United States Postal Service mail; and providing customer assistance, which includes mail stop code management, mail preparation and processing, providing USPS mailing supplies for ICs, Permit Imprint mailings, Business Reply Mail, addressing standards, interoffice communications, and special services (registered, certified, insured and express mail.) Establishment of clustered mail service to on and off campus locations to reduce resources.





Two employees from the Division of Intramural Research Services hand off a very valuable piglet, subject for a vaccine development.

Office of Research Services Advisory Structure

The Office of Research Services (ORS) is served by a number of standing advisory committees (using the term generically to include boards, task forces, user groups, working groups, etc.) that represent the many facets of its broad customer base. Some of these committees have formal charters defining membership, responsibilities, and reporting channels. Others have developed more informally, but nevertheless serve important roles, helping ORS define priorities and improve service delivery. Various Ad Hoc Advisory Committees also exist. All of the committees listed below are managed by ORS staff. Many report only to ORS, providing advice to the ORS Division Directors and the Associate Director for Research Services, who then can forward this advice to the NIH Deputy Directors and the NIH Director. These "ORS Committees" have dual reporting responsibilities. Since they are managed by ORS staff, they provide advice to the ORS Division Directors/ Associate Director through normal organizational channels. On the other hand, these committees are chartered to provide advice directly to the NIH Deputy Directors or the NIH Director.

The primary advisory committee to the Associate Director for Research Services is the ORS Advisory Committee, listed first. Additional committees are listed in alphabetical order.


ORS Advisory Committee

John B. Smith, Chair

The ORS Advisory Committee provides advice to the Associate Director for Research Services (ADRS) on any matters of program, policy, or budget that the Director may bring to the Committee or that the Committee wishes to address.

The Committee is charged with the responsibility for identifying problems for a specific study and/or reviewing the program and budget of any Branch or other major component of ORS as decided by the Committee in consultation with the ADRS. Issues identified by the Central Services Review Committee are also considered. Reports and recommendations from these reviews are made to the ADRS, and results of reviews that might impact budgetary decisionmaking for the central services activities may be brought to the attention of the Central Services Review Committee.





Association for Assessment and Accreditation of Laboratory Animal Care International AAALAC Task Force

Jane B. Smith, Chair


The mission of the AAALAC Task Force is to ensure the continued AAALAC (Association for Assessment and Accreditation of Laboratory Animal Care International) accreditation of NIH animal facilities from a physical plant integrity and operational standpoint. The Task Force meets every two weeks to discuss issues, identify objectives, and review status and progress reports.

A subset of the Task Force, called the Buildings and Facilities (B&F) Task Force, has as its mission to identify major new facility or renovation needs, to make recommendations relative to those needs, and to review progress of the resultant B&F program and constituent projects. It meets periodically to review progress of major animal facility projects funded by the B&F program.



ACRF Tower Coordinating Committee

Charles M. Smith, Chair



coordination of generic support services (such as engineering, safety, pest management) for the 11-story ACRF Tower Animal Facility and satellite animal rooms in Building 10. This service is provided through interagency agreements with the 10 ICs that occupy and separately manage the 11 floors of the facility. These 10 ICs, along with the VRP ACRF Tower Facility Manager, collectively form the ACRF Tower Coordinating Committee. The Committee serves an essential role in maintaining an open line of communication among the ICS and the facility manager, thus assuring proper functioning of the facility and compliance of the 11 floors with all of the assorted policies and procedures inherent in the operation of any animal facility. The Committee meets on a bi-monthly basis to disseminate general information, seek consensus for changes in the ACRF Tower and B2 Cage Wash operations, and discuss issues that require resolution of the members.



BEPS Ad Hoc Promotions Advisory Committee

Betty Smith, Chair

When the Bioengineering and Physical Sciences Program (BEPS) Director considers converting the appointment of a member of BEPS' engineering staff from a term appointment to a permanent appointment, or when the Director wishes to promote a member of BEPS' engineering staff to the GS 12 level or above, he/she obtains the concurrence of BEPS' ad hoc Promotions Advisory Committee, prior to submitting the proposal to the NIH Scientific Directors.

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Building 10A User Committee

Betty Smith, Chair

The Building 10A User Committee began in 1990 in response to the renovation of Building 10A to a centralized animal holding facility which would meet AAALAC accreditation standards. At that time, the User Committee provided input into the design and investigator requirements for procedure and holding space. User Committee members are appointed by each of the Scientific Directors of participating ICS. Major functions include discussion of pathogen outbreaks, distribution of dedicated and general use procedure rooms, and review and approval of the annual budget.



IC Safety and Health Committees

The purpose of the IC Safety and Health Committees is the promotion of safety and health policies, practices and procedures is the responsibility of each member of the NIH community. Employees are expected to perform their work safely and not place themselves or others at risk of injury or illness due to unsafe or unhealthy conditions, actions or infractions. The IC Safety and Health Committees were established to assist each IC in conveying NIH occupational safety and health regulations to ensure compliance with NIH Manual Issuance #1340-NIH. The IC Safety and Health Committees report to the IC Director through the Scientific Director.

Activities: The IC Safety and Health Committees meet at least quarterly; monitor performance of safety and health activities of the IC and make recommendations to the IC Scientific Director; develop policies and programs in coordination with the Division of Safety, ORS specific to the IC; perform annual workplace surveys with assistance from the Occupational Safety and Health Branch, DS, ORS to assure compliance with NIH and OSHA safety and health policies and standards; develop procedures for handling occupational safety and health suggestions, review and comment on proposed NIH policies, guidelines and standards as requested by the NIH Occupational Safety and Health Committee; assist in the development of prevention strategies for work related accidents and injuries or property damage; assist the Office of Intramural Research and the DS in the dissemination of safety information in the event of an emergency.

Membership and Organization: The IC Safety and Health Committees are composed of IC employees selected by the IC Scientific Director or his/her designee. The Chairperson is selected from among the Committee membership by the IC Scientific Director or his/her designee. The Chairperson serves a two-year term. The members serve overlapping three-year terms.



Mail Managers Committee

Betty Smith, Chair

The purpose of the Committee is to ensure that quality mail service is provided throughout NIH at reduced costs in human and fiscal resources. Mail Managers serve as points of contact for mail related issues that have an impact on their respective ICDs, such as new mail stops, changes to mail stops, special mailing procedures, etc.



MAPB Advisory Committee

Betty Smith, Chair

The Committee serves in an advisory capacity to the Director, DIRS, the MAPB Branch Chief, and the MAPB management team. It makes recommendations, and offers suggestions for activities, focusing on service, quality, value, responsiveness to users, appropriateness to intramural research, present and future needs, and provides input for the Branch concerning major long-range programs and issues that may affect the MAPB.



The NIH Biosafety Committee is required by the NIH Guidelines for Research

Involving Recombinant DNA Molecules. The Committee provides recommendations for safety policy to the Director, NTH, or his designee, in matters pertaining to the control of hazards associated with the intramural use of microbiological agents and their vectors and serves as an advisory body to the Occupational Safety and Health Branch, DS, ORS.



NIH Day Care Board

Betty Smith, Chair

The duties of the Oversight Board are to ensure appropriate evaluation, licensing, and accreditation of NIH-sponsored day care programs; provide and oversee a grievance appeal process; meet with the NIH Director to discuss and review NIH Day Care; help to communicate day care information to all NIH employees; serve as a forum for discussion of NIH day care issues and receive suggestions and recommendations from the NIH community; and ensure that established NIH day care policies, contract terms, and use agreements are adhered to by NIH Day Care providers. In addition, the Board serves as the advocate for day care at NIH, determining the extent to which existing services are meeting NIH employees' day care needs and making recommendations for modifications, expansions and extensions to existing services as required.

ORS
ADVISORY
STRUCTURE



NIH Library Advisory Committee

, *Chair*

The NIH Library Advisory Committee advises the NIH Librarian, ORS Management, and the Deputy Director of Intramural Research on operating plans and problems in the Library. The Committee also serves in an advisory capacity on policies affecting photocopy service, use of space, and eligibility for library privileges. Occasionally, members are asked to respond as representative users to potential collection development decisions such as journal retention or cancellation recommendations.



NIH Occupational Safety and Health Committee

, *Chair*

The NIH Occupational Safety and Health Committee is required by the U.S. Occupational Safety and Health Act. The Committee provides recommendations for safety policy to the Director, NIH, or his designee, in matters pertaining to occupational health, accident control and fire prevention and serves as an advisory body to the Division of Safety, ORS.



NIH Parking and Transportation Working Group

, *Chair*

The NIH Parking & Transportation Working Group (PTWG) provides recommendations and advice on NIH parking and transportation issues to the Associate Director for Research Services and NIH Management. The PTWG is composed of employees representing all facets of the NIH as well as key personnel responsible for carrying out transportation and parking initiatives. The PTWG discusses ideas, alternatives and constraints, and considers strategies that mitigate adverse impacts and improve accessibility and safety for employees, visitors, contractors, and the surrounding community.



ORS Animal Care and Use Committee

, *Chair*

The ORS Animal Care and Use Committee (ACUC) is a legally required and constituted committee that is appointed by the Associate Director for Research Services. The committee oversees ORS' animal program, facilities, and procedures, including the key functions of reviewing and approving requests to use animals in research. The Committee reviews animal care and use programs and inspects all ORS facilities (including satellite facilities and animal study areas) at least semiannually. The ORS ACUC is responsible for the written report of the semiannual evaluation of the Animal Care and Use program and Central Animal Facilities.

Parking Management Team

, Chair

The Parking Management Team was established to coordinate the implementation of managed parking at NIH and advise the ADRS on related parking and transportation issues. The Team meets monthly to monitor the current managed parking systems, including attendant assisted employee parking and pay visitor parking; review other transportation issues, such as the shuttle service, motor pool, and pedestrian and vehicular circulation; assess effects of construction on parking and circulation and evaluate measures for their mitigation; consider new parking and transportation initiatives; and, provide recommendations on the future management of parking and transportation services. Members include representatives from various Divisions within the Office of Research Services, the Office of Logistics Management, the Office of General Counsel, the Clinical Center, the NIH Quality of Worklife Committee Colonial Parking (the current parking contractor)??, and Gorove/Slade Associates (current transportation consultant).??

Deliberative Committee

understanding of the roles and responsibilities of the NIH Police Branch as it relates to the mission of the NIH and to provide advice on recommended means to improve relationships between the Police Branch and the NIH community. The Police Community Relations Council identifies areas where actions can be taken, by both communities, that compliment and benefit each other.

Radiation Safety Committee

, Chair

The Radiation Safety Committee (RSC) is required by the regulations of the U.S. Nuclear Regulatory Commission. The RSC is responsible to the Director, NIH, for oversight of the NIH Radiation Safety Program to ensure the safe use of radioactive materials and all sources of ionizing radiation throughout NIH and those NIH-occupied buildings included in the NIH Radiation Safety Program. The RSC is responsible for formulating policy with regard to radiation protection matters in the intramural research program that involve NIH employees and members of the general public, routine clinical and clinical research programs, and protection of the environment to ensure compliance with Federal regulations, particularly those of the U.S. Nuclear Regulatory Commission.

ORS
ADVISORY
STRUCTURE

The Radioactive Drug Research Committee is a subcommittee of the NIEH Radiation Safety Committee.

The Radiation Safety Officer is responsible to the Director, NIH, for management and operation of the Radiation Safety Program as well as policy directives of the RSC.

Space Recommendation Board
, *Chair*

The Space Recommendation Board was established to track, evaluate, and make recommendations to the NIH Director on requests for space.



ACKNOWLEDGEMENTS

STEVEN A. FICCA
ORS Director

JANE B. SMITH
Assistant Director

ROBERT A. JONES
Assistant to the Secretary

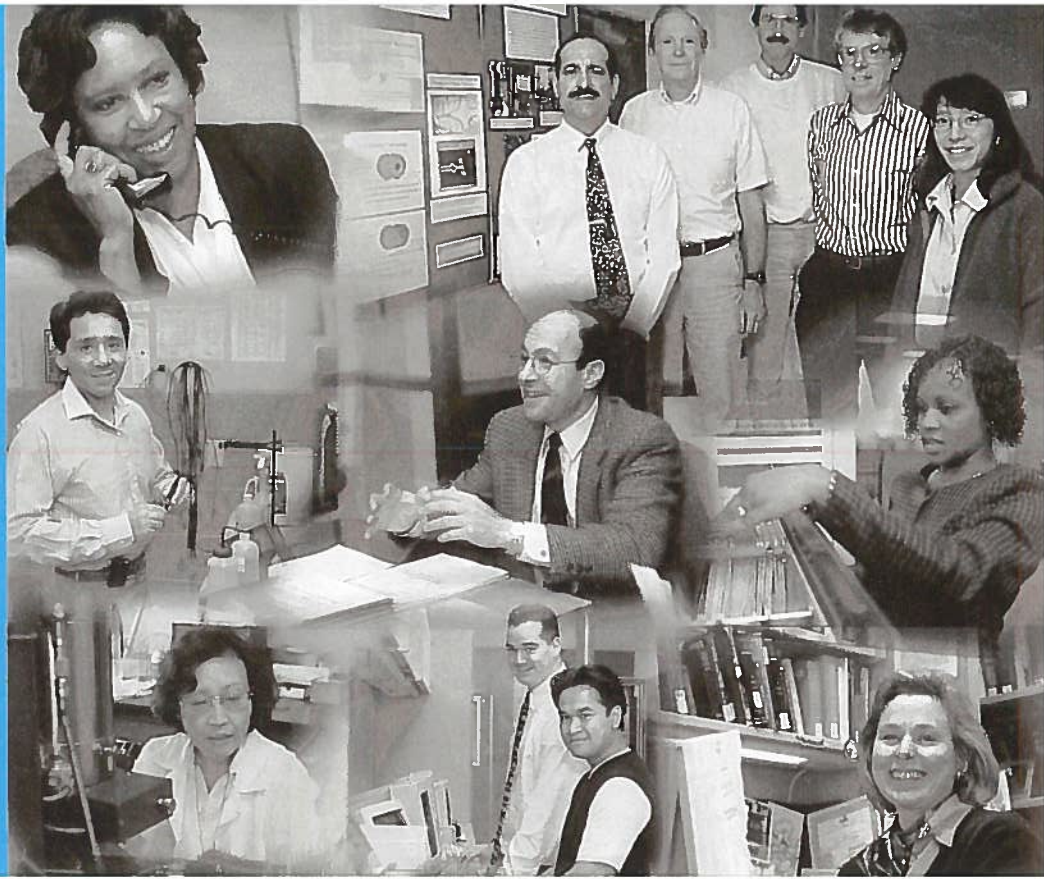
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OFFICE OF RESEARCH SERVICES