

United States Government Accountability Office Report to Congressional Committees

January 2024

PUBLIC HEALTH PREPAREDNESS

HHS Emergency Agency Needs to Strengthen Workforce Planning

GAO Highlights

Highlights of GAO-24-106108, a report to congressional committees

Why GAO Did This Study

ASPR is a component within HHS. GAO placed HHS's leadership and coordination of public health emergencies on its high-risk list in January 2022, in part because ASPR did not have strategic workforce planning in certain areas. ASPR has relied on an HHS staff division, and other agencies, to assist with its hiring needs.

The CARES Act includes a provision for GAO to report on oversight efforts related to the COVID-19 pandemic. This report examines: (1) the size of ASPR's workforce, (2) ASPR's plans for improving its hiring capabilities, and (3) ASPR's strategic workforce planning practices.

To conduct this work, GAO reviewed ASPR documentation and workforce data and interviewed HHS and Office of Personnel Management (OPM) officials. GAO assessed ASPR's actions against GAO's key principles of strategic workforce planning and agency reform and OPM guidance.

What GAO Recommends

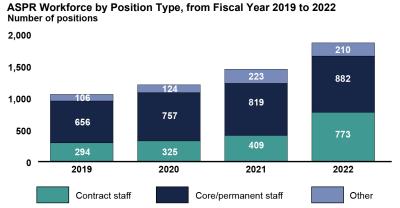
GAO is making four recommendations that ASPR (1) establish specific goals and performance measures to use for its new hiring office once it is fully operational, (2) develop tailored strategies for recruiting and hiring human capital staff for the new office, (3) identify the critical areas that need workforce assessments and develop plans to implement them, and (4) conduct an agency-wide workforce assessment. HHS neither agreed nor disagreed with the first two recommendations and agreed with the last two recommendations. GAO believes actions are needed to address all of the recommendations.

View GAO-24-106108. For more information, contact Mary Denigan-Macauley at (202) 512-7114 or DeniganMacauleyM@gao.gov.

PUBLIC HEALTH PREPAREDNESS HHS Emergency Agency Needs to Strengthen Workforce Planning

What GAO Found

The Administration for Strategic Preparedness and Response (ASPR) leads the nation's medical and public health response to emergencies. Its workforce has increased substantially to fulfill this growing role, roughly doubling from 1,000 to almost 2,000 employees from fiscal year 2019 to 2022. Contract staff contributed to most of this growth. Officials stated they used these staff to scale up quickly to respond to the COVID-19 pandemic; use will decrease as the response unwinds.



Source: GAO analysis of Administration for Strategic Preparedness and Response (ASPR) data. | GAO-24-106108

ASPR is developing an in-house hiring office with the aim of improving its hiring capabilities. ASPR officials expect the office to be fully operational by October 2025. The office is to address four areas of concern that ASPR had with services provided by the Department of Health and Human Services (HHS) staff division: hiring costs, time-to-hire, service quality, and unique workforce needs, according to ASPR documentation and interviews. However, ASPR does not have specific goals and performance measures to use for the office, once operational, to help ensure these areas of concern will be addressed. For example, while time-to-hire had been slow in the past, officials could not provide specific goals or measures that outline how the new office will improve upon the status quo, especially given that the HHS staff division has made service improvements, according to ASPR officials. Specific goals and measures provide a framework for monitoring progress and will allow ASPR to make adjustments, if needed. In addition, ASPR intends to hire 41 human capital staff for the office by October 2025. However, it does not have tailored recruitment and hiring strategies that account for government-wide shortages of these staff.

ASPR's December 2022 strategic plan prioritized strategic workforce planning, including conducting workforce assessments to identify critical skills and competencies needed to achieve the agency's mission. Further, in February 2023, ASPR announced a new organizational structure to better achieve its mission. However, ASPR has not identified critical areas in the agency that need workforce assessments nor developed a plan to conduct them. It also has not conducted an agency-wide workforce assessment to prioritize the skills and competencies of greatest need to achieve the agency's goals and mission. Without conducting these assessments, ASPR cannot be assured that its workforce has the skills and competencies in place to support its reorganization, and ultimately, to meet its mission of leading the nation's response to public health emergencies.

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Abbreviations		
ASPR	Administration for Strategic Preparedness and Response	
BARDA	Biomedical Advanced Research and Development Authority	
CDC	Centers for Disease Control and Prevention	
HHS	Department of Health and Human Services	
OPM SROC	Office of Personnel Management Staffing, Recruitment, and Operations Center	

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U.S. GOVERNMENT ACCOUNTABILITY OFFICE

441 G St. N.W. Washington, DC 20548

January 16, 2024

Congressional Committees

Within the Department of Health and Human Services (HHS), the Administration for Strategic Preparedness and Response (ASPR) leads the nation's medical and public health preparedness for, response to, and recovery from disasters and public health emergencies. In recent years, ASPR's responsibilities have grown substantially. For example, in 2018, ASPR became responsible for managing the nation's Strategic National Stockpile. And more recently, it became responsible for managing activities to address medical supply vulnerabilities that became apparent during the COVID-19 pandemic, among other responsibilities.

To meet its increasing responsibilities, ASPR needs a capable workforce. However, in our prior work we have identified deficiencies in ASPR's strategic workforce planning and challenges it has faced hiring in certain areas. These issues and others led us to add HHS's leadership and coordination of public health emergencies to our high-risk list in January 2022.¹ For example, we reported in January 2022 that ASPR lacked strategies for addressing the workforce needs of its HHS Coordination Operations and Response Element—a new group within ASPR in charge of developing, producing, and distributing COVID-19 vaccines.² We also found in April 2022 that ASPR's Office of Industrial Base Management and Supply Chain—a new office charged with strengthening and expanding the U.S. public health industrial base and delivering innovative

¹See GAO, New High-Risk Designation: HHS and Public Health Emergencies appendix in COVID-19: Significant Improvements Are Needed for Overseeing Relief Funds and Leading Responses to Public Health Emergencies, GAO-22-105291 (Washington, D.C.: Jan. 27, 2022) and High-Risk Series: Efforts Made to Achieve Progress Need to Be Maintained and Expanded to Fully Address All Areas, GAO-23-106203 (Washington, D.C.: Apr. 20, 2023).

²This group (formerly known as the Countermeasures Acceleration Group) had been a joint effort between HHS and the Department of Defense to respond to COVID-19 vaccine needs during the pandemic. At the time of our review, these responsibilities were transferring to HHS to be led by ASPR. We recommended that HHS develop and implement strategies to address the workforce needs identified as important for a successful transition and continued leadership of the effort. HHS did not concur with GAO's recommendation; however, in April 2023, HHS stated that it is finalizing plans to establish HHS Coordination Operations and Response Element's permanent staff. As of November 2023, this recommendation remains unimplemented. GAO, *COVID-19: HHS and DOD Transitioned Vaccine Responsibilities to HHS, But Need to Address Outstanding Issues,* GAO-22-104453 (Washington, D.C.: Jan. 19, 2022).

solutions to counter health security threats—had not assessed the critical workforce skills and competencies needed to support and sustain the mission and goals of the office.³ In addition, in June 2020, we identified deficiencies in ASPR's strategic workforce planning for intermittent staff who respond to public health emergencies and challenges with their hiring prior to the COVID-19 pandemic.⁴

On July 22, 2022, the Secretary of HHS announced ASPR's elevation to an operating division and plans for other organizational changes to better position the agency to fulfill its role in leading the nation's response to public health emergencies. The Assistant Secretary for Preparedness and Response reported the planned changes would improve the agency's hiring capabilities, among other capabilities. As of November 2023, ASPR has relied on and paid fees to other agencies (referred to in this report as hiring partners) to assist with its hiring needs.

The CARES Act includes a provision for us to report on the federal response to the COVID-19 pandemic.⁵ This report is also part of our body

⁴These staff—referred to as "intermittent responders" in this report—are part of the National Disaster Medical System. They are individuals who work outside the federal government (such as doctors, nurses, and paramedics), but who may be called upon to assist with the federal medical and public health response during public health emergencies. In June 2020, we made five recommendations to strengthen ASPR's strategic workforce planning for intermittent responders. As of November 2023, HHS has implemented one of these recommendations. See GAO, *Public Health Preparedness: HHS Should Take Actions to Ensure It Has an Adequate Number of Effectively Trained Emergency Responders*, GAO-20-525 (Washington, D.C.: June 18, 2020).

⁵Specifically, the act requires us to monitor and oversee the federal government's efforts to prepare for, respond to, and recover from the pandemic. Pub. L. No. 116-136, § 19010(b), 134 Stat. 281, 580 (2020). The American Rescue Plan Act of 2021 also includes a provision for us to conduct oversight of the COVID-19 response. Pub. L. No. 117-2, § 4002, 135 Stat. 4, 78. All of GAO's reports related to the COVID-19 pandemic are available on GAO's website at https://www.gao.gov/coronavirus.

³We recommended that ASPR conduct a workforce assessment of this office (formerly known as the Industrial Base Expansion Office) to determine the critical skills and competencies needed for the office and develop corresponding workforce strategies to address those needs. ASPR agreed with GAO's recommendation. In November 2023, the agency provided documentation of its efforts to identify the critical skills and competencies needed for this office, but corresponding workforce strategies to address identified needs remain to be developed. Therefore, this recommendation remains partially implemented, as of November 2023. See the *Public Health Industrial Base Expansion* appendix in *COVID-19: Current and Future Federal Preparedness Requires Fixes to Improve Health Data and Address Improper Payments*, GAO-22-105397 (Washington, D.C.: Apr. 27, 2022).

of work on HHS's leadership and coordination of public health emergencies.⁶ This report

- 1. describes the size of ASPR's workforce and how it has changed since the COVID-19 pandemic,
- 2. examines ASPR's plans for improving its hiring capabilities, and
- 3. examines ASPR's strategic workforce planning practices.

To describe the composition of ASPR's workforce and how it has changed since the COVID-19 pandemic, we collected and analyzed ASPR workforce data as of the end of each fiscal year, 2019 through 2022. These were point-in-time data as of the end of each fiscal year.⁷ We assessed the reliability of these data by comparing them to data from other sources, such as data from the Office of Personnel Management (OPM) on HHS's workforce; communicating with officials responsible for HHS and ASPR human resources data to understand the sources of the data and controls in place to ensure its accuracy and completeness; and performing checks of the data for consistency and completeness. Based on these steps, we found these data to be reliable for reporting on the composition of ASPR's workforce. Lastly, we interviewed officials in ASPR's Office of Human Capital responsible for the agency's human capital planning and management to obtain additional context on observed workforce changes in the data.⁸

To examine ASPR's plans for improving its hiring capabilities, we reviewed ASPR documentation, including memoranda of understanding between ASPR and its hiring partners, ASPR budget justifications, and the agency's business case outlining proposed hiring improvements and related transition plan documents created by ASPR. We interviewed officials in ASPR's Office of Human Capital and officials in ASPR's Biomedical Advanced Research and Development Authority (BARDA) who oversee workforce operations. We interviewed these officials to understand hiring processes and capabilities, including with ASPR's hiring partners; related challenges; and steps ASPR is taking to improve

⁶See GAO-22-105291 and GAO-23-106203.

⁷Fiscal year 2019 data were as of September 24, 2019; fiscal year 2020 data were as of September 28, 2020; fiscal year 2021 data were as of September 24, 2021; and fiscal year 2022 data were as of September 26, 2022. Our analysis did not include review of data on the number of enrolled intermittent responders. We recently reported on ASPR's strategic workforce planning for and training of these responders, see GAO-20-525.

⁸This office was known as the Division of Human Capital until February 2023.

its hiring capabilities. We interviewed officials from the Staffing, Recruitment, and Operations Center (SROC), within HHS's Office of Human Resources; the Centers for Disease Control and Prevention (CDC); and OPM—ASPR's hiring partners as of September 2023—to corroborate information obtained from ASPR. We assessed ASPR's plans for improving its hiring capabilities against OPM's November 2022 Workforce Planning Guide, as well as selected GAO-identified key principles for agency reform efforts and strategic workforce planning.9 GAO principles for agency reform include that agencies should (1) establish specific goals and related performance measures, (2) consider and resolve any agency crosscutting or government-wide issues when developing proposed reforms, and (3) conduct strategic workforce planning to support reform efforts. A GAO principle for strategic workforce planning notes the importance of developing tailored strategies once workforce gaps are identified to address those gaps, such as through recruiting and hiring. We also reviewed documentation from the Partnership for Public Service related to key recruiting practices.¹⁰

To examine ASPR's strategic workforce planning practices, we reviewed ASPR documentation, including ASPR's strategic plan, workforce assessment and planning documentation, and ASPR annual hiring plans. We also interviewed officials in ASPR's Office of Human Capital and BARDA. We evaluated ASPR's strategic workforce planning practices against GAO-identified key principles for strategic workforce planning and successful agency reform efforts, which emphasize the importance of determining current and future workforce needs to achieve an agency's mission and goals.¹¹

We conducted this performance audit from June 2022 to January 2024 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our

¹⁰The Partnership for Public Service is a nonprofit, nonpartisan organization with a mission to build a better government and stronger democracy. The organization does work related to federal talent, public service leadership, society's commitment to government, and the partnership, according to its 2023 impact report.

¹¹See GAO-04-39 and GAO-18-427.

⁹Office of Personnel Management, *Workforce Planning Guide* (Washington, D.C.: November 2022); GAO, *Government Reorganization: Key Questions to Assess Agency Reform Efforts*, GAO-18-427 (Washington, D.C.: June 13, 2018); and GAO, *Human Capital: Key Principles for Effective Strategic Workforce Planning*, GAO-04-39 (Washington, D.C.: Dec 11, 2003).

findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Background	
ASPR's Increased Responsibilities and Related Reorganization	Since 2018, ASPR has assumed many new responsibilities, including the following:
	 Managing the nation's Strategic National Stockpile, which is a multibillion-dollar inventory of medical countermeasures—drugs, vaccines, supplies, and other materials—to respond to a broad range of public health emergencies. The responsibility was transferred to ASPR from CDC in October 2018.
	 Addressing medical product supply vulnerabilities highlighted during the COVID-19 pandemic. ASPR established a new office, the Office of Industrial Base Management and Supply Chain, in September 2020.
	 Developing, producing, and distributing COVID-19 vaccines. These responsibilities transitioned to ASPR's newly established group, HHS Coordination Operations and Response Element, at the beginning of 2022. During the pandemic, the Department of Defense and HHS shared these responsibilities.
	Following ASPR's July 2022 elevation to an operating division, the Assistant Secretary for Preparedness and Response announced an agency reorganization and released a corresponding new ASPR organizational structure on February 11, 2023, effective that day. ¹² The reorganization accounts for the agency's expanded mission and new capabilities and created clear and straightforward naming conventions for ASPR programs, according to the Assistant Secretary. For example, the Office of Incident Command and Control was changed to the Office of Preparedness.
	Under the new organizational structure, certain programs within ASPR— the Strategic National Stockpile, HHS Coordination Operations and Response Element, and the Office of Industrial Base Management and Supply Chain—have become individual offices, increasing the number of ASPR's offices from four to seven.

 $^{^{12}}$ This reorganization was approved by the Secretary of HHS on January 27, 2023. See 88 Fed. Reg. 10,125 (Feb. 16, 2023).

See appendix I for an HHS organizational chart with offices and operating divisions prior to and as of ASPR's elevation to an operating division in July 2022, as well as ASPR organizational charts prior to and as of ASPR's reorganization in February 2023.

ASPR Workforce ASPR's workforce can be grouped into four broad position types. **Core staff.** These are full-time and part-time employees of the federal government that hold permanent positions within ASPR. They include General Schedule and Senior Executive Service employees.¹³ **Temporary staff.** These are staff serving in non-permanent positions • at ASPR and whose employment is expected to last for a specified time period with a not-to-exceed date.¹⁴ Commissioned Corps officers. The Commissioned Corps is the federal uniformed service of the U.S. Public Health Service.¹⁵ Commissioned Corps officers, such as doctors, nurses, and scientists, typically work within the federal government, including agencies such as CDC, the Food and Drug Administration, and National Institutes of Health. These officers can be temporarily assigned to other agencies, such as ASPR, to assist with a federal response. ¹³Most white-collar employees of the federal government are hired for positions under the General Schedule classification system—the federal government's system for defining and organizing federal positions, primarily to assign rates of pay based on a series of grades that reflect the complexity of the work and knowledge required to do the job. These grades are on a scale of 1 to 15, with 15 being the most complex. The Senior Executive Service consists of federal executives selected for their leadership qualifications who serve in key positions within agencies, just below the top presidential appointees, and oversee nearly every government activity in approximately 75 federal agencies. They include managerial, supervisory, and policy positions classified above General Schedule-15. ¹⁴For the purposes of this report, we use the term "temporary staff" to include staff detailed from other federal agencies for a temporary period of time and individuals serving in term or temporary appointments. Temporary appointments are those that last less than 1 year, and term appointments are those that last more than 1 year but not more than 4 years. See 5 C.F.R. § 316.301 (2023). ¹⁵Commissioned Corps officers may be deployed to respond to an urgent or emergency public health care need arising from (1) a national emergency declared by the President under the National Emergencies Act; (2) an emergency or major disaster declared by the President under the Robert T. Stafford Disaster Relief and Emergency Assistance Act; (3) a public health emergency declared by the Secretary of Health and Human Services under the Public Health Service Act; or (4) any emergency that is appropriate for deployment, as determined by the Secretary of Health and Human Services. See 42 U.S.C. §§ 204a(a)(5) and 215(e).

	defined by the Federal Acquisition Regulation. ¹⁶ ASPR counts these individuals within its workforce, although they are not federal employees; they work for organizations that contract staff to the federal government.
	ASPR also enrolls intermittent staff to work as responders during public health emergencies as part of the National Disaster Medical System. These responders work outside the federal government (such as doctors, nurses, and paramedics) but may be called upon to assist with the federal medical and public health response during public health emergencies. While called upon, they become employees of the federal government. HHS deploys these intermittent responders to provide patient care and movement, for example. As of February 8, 2023, ASPR had 4,239 enrolled intermittent responders, according to agency officials. ¹⁷
ASPR Hiring	ASPR's Office of Human Capital is responsible for the agency's human capital planning and management. It relies on external hiring partners to conduct certain hiring actions on ASPR's behalf. ¹⁸ Until September 30, 2023, these were SROC, CDC, and OPM. ¹⁹ ASPR's agreement with CDC ended on September 30, 2023, according to ASPR officials. As of October 1, 2023, SROC took over hiring activities previously conducted by CDC, according to ASPR officials.
	Hiring, which includes recruitment, is a multi-step process. In this report, we use the term "hiring" to refer to actions within this process. The process begins with ASPR submitting a hiring request to its hiring partner
	¹⁶ The Federal Acquisition Regulation is the primary set of rules regarding government procurement in the United States and applies to executive agencies in their acquisition of supplies and services with appropriated funds. The Federal Acquisition Regulation defines a service contract as a contract that directly engages the time and effort of a contractor whose primary purpose is to perform an identifiable task rather than to furnish an end item of supply. See 48 C.F.R. § 37.101 (2023).
	¹⁷ For more information about these intermittent responders, see GAO-20-525.
	¹⁸ Until recently, ASPR did not have the authority to hire staff, according to ASPR officials. In order to hire personnel, an agency must have delegated examining authority. Other HHS operating and staff divisions have this authority, such as CDC, the Food and Drug Administration, and the National Institutes of Health. On September 1, 2023, HHS granted ASPR delegated examining authority.
	190000 is within the UUD staff division the Assistant Oscintation of Administration. Office

¹⁹SROC is within the HHS staff division, the Assistant Secretary of Administration's Office of Human Resources. It provides hiring and human capital services to certain staff and operating divisions within HHS, according to HHS officials.

Contract staff. These are staff working under service contracts as

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and ends with a new hire starting work at ASPR. ASPR and its hiring partners share steps in the hiring process. For example:

- Hiring partners create and post job announcements, conduct initial review of applications, and extend job offers once candidates are selected, among other steps.
- ASPR approves job announcements for ASPR positions and works with ASPR program management to interview qualified applicants, check references, and ultimately select candidates to fill positions, among other activities.

See figure 1 for key hiring process steps among ASPR and its hiring partners. ASPR's hiring partners also support additional human capital services on ASPR's behalf outside of the hiring process, such as employee and labor relations.²⁰

²⁰Employee and labor relations services include managing employee accountability for performance and investigating and responding to employee complaints. Other human capital services that the hiring partners may provide on behalf of ASPR are, for example, pay administration and benefits and retirement counseling.

Hiring partner task	ASPR task	Key hiring process step	Description
\bigcirc		Submit hiring request	 Submit a hiring request to one of ASPR's hiring partners, following ASPR's determina- tion of a hiring need.
	→ ●	Develop recruitment strategies	 Determine recruitment strategies, such as job posting strategies and strategies to solicit candidates.
•		Create job announcement	 Develop job announcement—including key information about the position, such as job responsibilities and skills required. Determine what information the applicant will be required to provide to assess their qualifications.
- Co-		Approve job announcement	• Review and approve the job announcement.
		Post job announcement	 Post job announcement on USAJobs.^a
•		Conduct initial review of applications	 Review job applications and send ASPR a "certificate"—a ranked list of applicants deemed qualified for the position.^b
		Interview applicants and make selection	 Interview applicants, check references, make selections, and return certificate with selected applicants to hiring partner.
•	-	Send tentative job offer	 Extend tentative job offer to applicant.
		Initiate security clearance	 Obtain any required documents from selected applicant for background check and security clearance, if applicable.
•		Extend official job offer, and conduct onboarding actions	 Extend official job offer and coordinate the date for the selected applicant to begin work (known as "entry on duty"). Obtain required documents and forms from selected applicant, including information such as current employment, and security clearance level.

Figure 1: Key Hiring Process Steps for ASPR and Its Hiring Partners

Source: GAO analysis of Office of Personnel Management documentation and agreements between Administration for Strategic Preparedness and Response (ASPR) and its hiring partners. | GAO-24-106108

Note:

ASPR relies on other agencies (referred to in this report as hiring partners) to assist with its hiring needs. Until September 30, 2023, ASPR's hiring partners were the Department of Health and Human Service's Staffing, Recruitment, and Operations Center (SROC); the Centers for Disease Control and Prevention (CDC); and the Office of Personnel Management. ASPR's agreement with CDC ended on September 30, 2023, according to ASPR officials. As of October 1, 2023, SROC took over hiring activities previously conducted by CDC, according to ASPR officials.

^aUSAJobs is the United States government's website for listing job opportunities in federal government agencies.

^bTo determine if an applicant is qualified, the hiring partner may review, for example, their education, past work experience, and certifications. Subject matter experts from ASPR or the hiring partners may also contribute to application review.

Historically, ASPR has relied on SROC for the greatest proportion of its hiring, according to officials, but with high hiring demands during COVID-19, among other reasons, ASPR engaged with OPM to supplement SROC hiring.²¹ As of August 2023, ASPR officials estimated the following hiring statistics:

- **SROC.** Assisted ASPR with about 50 percent of staff hired. ASPR officials estimated 75 percent of SROC's hiring was for intermittent responders and the remaining 25 percent was for staff in other roles throughout the agency.
- **CDC**. Assisted ASPR with about 30 percent of staff hired, specifically staff for the Strategic National Stockpile. As part of an agreement between ASPR and CDC when ASPR assumed responsibility for the stockpile in 2018, CDC continued assisting ASPR with this hiring.²²
- **OPM.** Assisted ASPR with about 20 percent of staff hired, primarily staff for BARDA and the Office of Strategy, Policy, and Requirements, the office responsible for developing strategies and plans for public health preparedness and response.²³

Strategic Workforce Planning We have previously reported that high-performing public organizations have found that maintaining a quality workforce requires them to systematically assess current and future workforce needs and formulate a long-term strategy to attract, retain, develop, and motivate employees.²⁴ While simple in theory, strategic workforce planning can be difficult to implement. Our prior work has identified key principles for effective strategic workforce planning. One of these key principles, and an initial step for agencies beginning to implement strategic workforce planning, is that they should identify the critical skills and competencies needed of

²¹SROC and its predecessor organizations have provided services to ASPR since fiscal year 2007.

²²ASPR's agreement with CDC ended on September 30, 2023, according to ASPR officials. The hiring previously conducted by CDC was taken over by SROC starting in fiscal year 2024 (October 2023), according to ASPR officials.

²³The office was known as the Office of Strategy, Policy, Planning and Requirements until February 2023.

²⁴GAO, Veterinarian Workforce: Actions Are Needed to Ensure Sufficient Capacity of Protecting Public and Animal Health, GAO-09-178 (Washington, D.C.: Feb. 4, 2009).

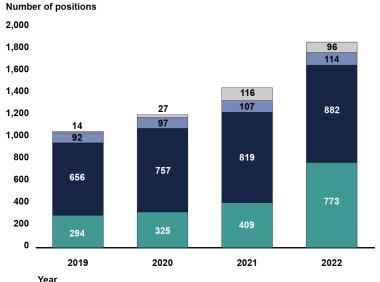
	their workforce in order to meet current and future agency-wide goals and mission. ²⁵ This strategic workforce planning should proceed any staff realignments, according to GAO's key principles for agency reform efforts. ²⁶ Further, once critical skills and competencies are identified and the current workforce assessed against those, another key principle is to develop tailored strategies to close any gaps between the identified needs and current workforce, such as hiring strategies.
ASPR's Workforce Nearly Doubled from Fiscal Years 2019 through 2022 with Increased Use of Contract Staff	ASPR's workforce nearly doubled during the COVID-19 pandemic, growing from 1,055 staff at the end of fiscal year 2019 (prior to the COVID-19 public health emergency declaration) to 1,856 staff at the end of fiscal year 2022—an increase of 801 staff. ²⁷ While all four types of staff (i.e., core, temporary, contract, and Commissioned Corps) increased over the time period, 479 contract staff were hired between 2019 and 2022, which accounted for almost 60 percent of the staff hired over this time period. (See fig. 2.)

²⁶GAO-18-427.

 $^{^{25}\}mbox{For more information on this key strategic workforce principle and others, see GAO-04-39.}$

²⁷Data are point-in-time as of the end of each fiscal year.

Figure 2: Change in ASPR's Workforce by Position Type, as of the End of Fiscal Years 2019 through 2022



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Temporary staff

Staff serving in non-permanent positions at ASPR and whose employment is expected to last for a specified time period with a not-to-exceed date.^a



Commissioned Corps officers

Part of the federal uniformed service of the U.S. Public Health Service.



<u>Core stam</u> Full-time and part-time employees of the federal government that hold permanent positions within ASPR.

Contract staff

Staff working under service contracts as defined by the Federal Acquisition Regulation, which is the primary set of rules regarding government procurement in the U.S.

Source: GAO analysis of Administration for Strategic Preparedness and Response (ASPR) data. | GAO-24-106108

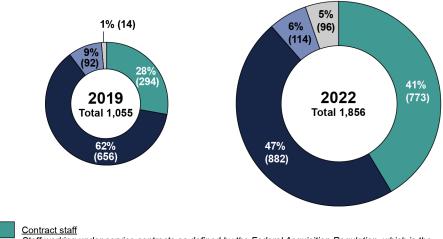
Note: Data are point-in-time as of the end of each fiscal year. Specifically, fiscal year 2019 data were as of September 24, 2019; fiscal year 2020 data were as of September 28, 2020; fiscal year 2021 data were as of September 24, 2021; and fiscal year 2022 data were as of September 26, 2022. We found a small number of individuals (i.e., between one and nine individuals depending on the year) who were included in ASPR's data under two different position types for a given year, indicating that an individual switched positions, such as a temporary employee was hired for a permanent, core staff position. We counted these individuals under both position types. ASPR's data did not include the position type for one individual who worked for ASPR in fiscal years 2020 and 2021. We have omitted this individual from our analysis of position types.

^aFor the purposes of this report, we use the term "temporary staff" to include staff detailed from other federal agencies for a temporary period of time and individuals serving in term or temporary appointments. Temporary appointments are those that last less than 1 year, and term appointments are those that last less than 1 year, and term appointments are those that last more than 1 year but not more than 4 years. See 5 C.F.R. § 316.301 (2023).

As a result of this increase, contract staff made up a larger portion of ASPR's workforce at the end of fiscal year 2022 when compared to ASPR's pre-pandemic workforce at the end of fiscal year 2019. (See fig. 3.)

Figure 3: ASPR Workforce by Position Type, as of the End of Fiscal Years 2019 and 2022

Percent (Number of staff)





Staff working under service contracts as defined by the Federal Acquisition Regulation, which is the primary set of rules regarding government procurement in the U.S.



Full-time and part-time employees of the federal government that hold permanent positions within ASPR.



Commissioned Corps officers

Part of the federal uniformed service of the U.S. Public Health Service.



Staff serving in non-permanent positions at ASPR and whose employment is expected to last for a specified time period with a not-to-exceed date.^a

Source: GAO analysis of Administration for Strategic Preparedness and Response (ASPR) data. | GAO-24-106108

Note: Data are point-in-time as of the end of each fiscal year. Specifically, fiscal year 2019 data were as of September 24, 2019, and fiscal year 2022 were as of September 26, 2022. We found a small number of individuals (i.e., between one and nine individuals depending on the year) who were included in ASPR's data under two different position types for a given year, indicating that these individuals switched positions, such as a temporary employee was hired for a permanent, core staff position. We counted these individuals under both position types, but in the total number of ASPR staff in fiscal years 2019 and 2022 counted them only once. Therefore, the total number of staff in fiscal years 2019 and 2022 is less than the sum of the number of staff for each position type. Percentages do not add up to 100 percent due to rounding.

^aFor the purposes of this report, we use the term "temporary staff" to include staff detailed from other federal agencies for a temporary period of time and individuals serving in term or temporary appointments. Temporary appointments are those that last less than 1 year and term appointments are those that last less than 1 year and term appointments are those that last more than 1 year but not more than 4 years. See 5 C.F.R. § 316.301 (2023).

Agency officials told us that they used contract staff to scale up quickly to respond to the needs of the COVID-19 pandemic and filled these positions using COVID-19 supplemental appropriations.²⁸ They expect the agency's use of contract staff to decrease as these funds are expended. Two offices created during the COVID-19 pandemic—the HHS Coordination Operations and Response Element and the Office of Industrial Base Management and Supply Chain—accounted for more than a quarter of the increase in contract staff. These offices had workforces made up of 89 percent and 75 percent contract staff, respectively, at the end of fiscal year 2022.

Core staff also increased during this time period, growing from 656 staff in 2019 to 882 staff in 2022. Generally, over the 4-year period, core staff were consistently concentrated in seven occupations, and all but one of these occupations grew over the course of the pandemic.²⁹ Biologists accounted for the largest increase. Between fiscal years 2019 through fiscal year 2022, this occupation increased by 207 percent. (See table 1.)

²⁹OPM defines occupations for the federal government. The federal government has workers in about 350 defined occupations.

²⁸HHS received approximately \$484 billion in COVID-19 supplemental appropriations from six COVID-19 relief laws. These six laws are the American Rescue Plan Act of 2021, Pub. L. No. 117-2, 135 Stat. 4; Consolidated Appropriations Act, 2021, Pub. L. No. 116-260, div. M and N, 134 Stat. 1182 (2020); Paycheck Protection Program and Health Care Enhancement Act, Pub. L. No. 116-139, 134 Stat. 620 (2020); CARES Act, Pub. L. No. 116-136, 134 Stat. 281 (2020); Families First Coronavirus Response Act, Pub. L. No. 116-127, 134 Stat. 178 (2020); and the Coronavirus Preparedness and Response Supplemental Appropriations Act, Pub. L. No. 116-123, 134 Stat. 146 (2020).

Table 1: Total ASPR Core Staff by Top Seven Occupations, as of the End of Fiscal Years 2019 through 2022

	Number o	of staff by fis	scal year		
Occupation					Change from 2019 to 2022
	2019	2020	2021	2022	(percent)
Acquisitions	40	63	74	90	125%
Biologist ^a	30	69	83	92	207
Emergency Management	92	99	116	120	30
Logistics	58	59	62	78	34
Management and Program Analysis	136	158	183	181	33
Miscellaneous Administration and Program ^b	69	68	63	58	-15
Public Health Program Specialist	50	56	58	62	24
All Other	182	186	180	201	10
Total	656	757	819	882	34%

Source: GAO analysis of Administration for Strategic Preparedness and Response (ASPR) data. | GAO-24-106108

Notes:

Data are point-in-time as of the end of each fiscal year. Specifically, fiscal year 2019 data were as of September 24, 2019; fiscal year 2020 data were as of September 28, 2020; fiscal year 2021 data were as of September 24, 2021; and fiscal year 2022 data were as of September 26, 2022.

The Office of Personnel Management defines occupations for the federal government. The federal government has workers in about 350 defined occupations. Less than 1 percent of ASPR's workforce data for core staff did not specify an occupation. These staff have been counted under "All Other."

^aIn fiscal year 2019, Biologist had the eighth highest number of ASPR staff. General Medical and Healthcare Series had the fifth highest number of ASPR staff with 53 staff under this occupation.

^bThis occupation covers positions with duties to perform, supervise, or manage administrative or program work for which no other occupation is appropriate. The work requires analytical ability, judgment, discretion, and knowledge of a substantial body of administrative or program principles, concepts, policies, and objectives.

ASPR Lacks Goals
and Measures to
Monitor the Progress
of Its New Hiring
Office Once
Operational and
Tailored Strategies for
Staffing It

ASPR Is Establishing a New In-House Hiring Office but Lacks Specific Goals and Performance Measures to Monitor the Office's Progress, Once Operational

ASPR is expanding its current Office of Human Capital to establish a new, in-house hiring office with the aim of improving hiring capabilities. However, ASPR lacks specific goals and related performance measures for the new office to monitor progress on goal achievement once the office is operational.

In June 2023, ASPR initiated its effort to establish the new office, which will include new hiring capabilities, as well as other human capital services.³⁰ To create its new office, ASPR plans to use 34 current ASPR human capital employees and hire an additional 41 new human capital employees to take over the hiring and human capital tasks currently completed by SROC and other hiring partners. For example, ASPR's new staff will assume responsibility for creating job announcements. ASPR plans to hire these new staff over a 2-year period starting in fiscal year 2024 and aims to complete the effort by October 2025, according to ASPR's transition plan.³¹

In a February 2023 business case for the new office and in interviews, ASPR officials stated that the intent of the new in-house hiring office was to improve hiring by addressing four areas of concern experienced with its hiring partner, SROC: (1) costs of hiring and human capital services, (2) time-to-hire time frames, (3) service quality, and (4) unique workforce

³⁰On September 1, 2023, HHS granted ASPR the needed authority to be able to conduct hiring. The in-house hiring office will also provide human capital services other than hiring such as benefits retirement and counseling, employee and labor relations, and records management, among others.

³¹ASPR created a transition plan for establishing its new office that included milestones and timeframes, such as hiring a certain number of staff by specific dates and obtaining hiring authority, with the latter occurring on September 1, 2023.

needs—specifically, ASPR's needs for intermittent responders and scientific staff.

However, ASPR lacks specific goals and performance measures to use for the new office, once it is fully operational, to help ensure these areas of concern will be addressed. Our review of ASPR documentation, including the business case, found that ASPR has established a specific goal for reducing hiring costs. However, ASPR lacks specific goals and related performance measures for the other three areas of concernnamely, time-to-hire, service quality, and unique workforce needs. While ASPR and SROC officials described recent improvements with SROC's services, ASPR plans to move forward with expanding its in-house hiring capabilities. Establishing specific goals and related performance measures is a key component of successful agency reform efforts. For example, having specific, identifiable goals and performance measures helps decision-makers, including agency officials and Congress, reach a shared understanding of the purpose of the reform effort. This includes determining the problems that genuinely need to be fixed, how to balance differing objectives, and identifying steps that need to be taken to create long-term gains.32

- **Costs.** ASPR has a defined goal to save about \$7 million annually starting at the beginning of fiscal year 2026 (October 2025)—the anticipated date by which the new office will be fully established. By transferring the hiring and human capital services in-house, ASPR anticipates costs will decrease and reflect the true hiring and human capital services required, according to the business case.
- Time-to-hire. ASPR has not established a specific, viable goal or related performance measures to help guide and monitor time-to-hire time frames. Historically, ASPR had experienced time-to-hire challenges when working with SROC. SROC's time-to-hire was 170 days when the business case was drafted, according to ASPR officials. However, throughout 2022, SROC decreased its time-to-hire by around 70 days (a 38 percent decrease), according to SROC officials. As of August 2023, SROC's time-to-hire was 106 days, according to ASPR officials.³³ This improvement was the result of new SROC leadership, increased SROC staff capacity, and better communication between the two agencies, according to ASPR and

³²GAO-18-427.

³³For ASPR's other hiring partners, OPM and CDC, time-to-hire was 72 days and 86 days, respectively, as of August 2023, according to ASPR officials.

SROC officials. In October 2023, ASPR officials stated that they plan to establish time-to-hire guidelines, time frames, and process maps by August 2024.

Service quality. ASPR has not established a specific goal, or related performance measures, to help improve upon or prevent quality issues from occurring in its new in-house hiring office. Quality issues with SROC's work included miscommunication, confusion about policies and procedures, processing errors, and sub-par customer service, according to the business case. However, similar to the time-to-hire issue, SROC quality issues had improved, according to ASPR officials in August 2023. While ASPR officials stated that they anticipate monitoring quality-of-work in the new in-house office, they could not provide specific performance measures, such as reducing the number and type of processing errors. Instead, they stated that each division within the Office of Human Capital, including the new inhouse hiring office, will be responsible for creating quality review steps in the form of spot checks and internal audits, though these have not been established yet.

A specific goal and performance measures related to quality will be particularly important for ASPR because, according to ASPR's transition plan, the agency offered positions in ASPR's new office to SROC staff—the same staff who have been working for the office that ASPR described as having quality issues in ASPR's business case.³⁴ Without a specific goal and performance measurers to monitor against, ASPR will lack data on how the new office will improve upon the quality of services provided by SROC. Additionally, ASPR plans to onboard 20 fewer human capital staff than the number of staff that a contractor hired by ASPR determined would be needed for the new office.³⁵ Working with fewer staff than recommended could potentially

³⁴SROC plans to reduce staff by approximately 36 percent because ASPR's transition to in-house hiring reduces the SROC workload, according to SROC officials. SROC officials said these human capital staff from SROC will be offered positions with ASPR or other federal human resources offices. In the summer of 2023, ASPR provided the opportunity for SROC staff to transfer to the agency; this solicitation resulted in four candidates being selected for hire, according to ASPR officials in October 2023. ASPR officials stated they may conduct another solicitation to SROC staff in fiscal year 2025.

³⁵According to the contractor's assessment conducted in March 2021, ASPR's new hiring office would require hiring 61 additional human capital staff. ASPR officials told us that ASPR plans to hire 41 staff, stating that the contractor's assessment was the ideal scenario. ASPR has developed a new organizational chart and conducted an internal reorganization that ensures all functions are covered by the additional 41 people, instead of the additional 61 people.

lead to quality problems, again pointing to the importance of having a specific quality goal and performance measures to monitor against.

Unique workforce needs. ASPR officials could not identify a specific goal and related performance measures to help guide and monitor how the new office will better support its stated unique workforce needs. ASPR officials stated in August 2023 that the agency could better support its unique hiring and human capital needs for intermittent responders and scientific staff than SROC had done. However, they could not explain how this will be accomplished. For example, ASPR could not articulate how its use of pay and hiring authorities would differ from those currently used by SROC. Additionally, ASPR officials stated in August 2023 that SROC had become more familiar with ASPR's unique needs, which improved the hiring process.

According to ASPR officials, its workforce needs are unique because of ASPR's mission to respond to disasters and public health emergencies. However, our prior work has found that other agencies involved in emergency response with in-house hiring offices and similar unique workforce needs continued to have hiring challenges. For example, the Federal Emergency Management Agency relies on temporary emergency responders and specialized contractors to fulfill its mission, much like ASPR. In May 2023, we reported that the Federal Emergency Management Agency's in-house hiring has experienced long-standing challenges reaching its hiring targets, despite using various hiring authorities and efforts to hire these staff.³⁶ Additionally, in January 2022, we reported that the Food and Drug Administration's in-house hiring office has historically faced challenges in recruiting and retaining sufficient medical product staff to meet its needs.³⁷

ASPR officials could not provide detailed reasons for why specific goals and performance measures for the new office had not yet been established. In response to our questions, ASPR officials stated in August 2023 that creating an in-house hiring office has been a long-term initiative of the agency. They further stated that the business case to discontinue

³⁷See GAO, FDA Workforce: Agency-Wide Workforce Planning Needed to Ensure Medical Product Staff Meet Current and Future Needs, GAO-22-104791 (Washington, D.C.: Jan. 14, 2022).

³⁶See GAO, *FEMA Disaster Workforce: Actions Needed to Address Deployment and Staff Development Challenges*, GAO-20-360 (Washington, D.C.: May 4, 2020) and GAO, *FEMA Disaster Workforce: Actions Needed to Improve Hiring Data and Address Staffing Gaps*, GAO-23-105663 (Washington, D.C.: May 2, 2023).

	SROC services was completed as a step in the formal process toward developing an in-house hiring office. It was not intended to outline or assess how ASPR's new office would lead to improvements over the status quo for time-to-hire, service quality, and supporting its unique workforce needs.
	ASPR's development of an in-house hiring office will require significant time and resources. ASPR has an overall goal for cost savings stemming from its planned move away from the current contracted hiring support. However, the ability to save costs can be affected by other factors, such as slow time-to-hire, poor work quality, and the inability to address unique workforce needs as anticipated, for example. Without specific goals and performance measures for these other factors, ASPR could be hindered in its ability to achieve its cost savings goal. Further, establishing specific goals and measures is a key principle of reform and will clarify the goal or goals of this new office, provide a framework for monitoring progress towards those goals, and allow ASPR to make adjustments if the goals are not being met.
ASPR's New Hiring Office Seeks to Add Human Capital Staff, but ASPR Lacks Recruiting and Hiring Strategies to Address Government- Wide Shortages of These Staff	To support its new hiring office, ASPR plans to hire 41 human capital staff over the next 2 years, starting in fiscal year 2024, according to its transition plan. ³⁸ Given the magnitude of the number of people ASPR plans to hire, as well as the government-wide shortages of these types of staff, this task could be challenging. While ASPR has some plans to implement its in-house hiring office, we found that ASPR lacks recruiting and hiring strategies that account for government-wide shortages of these staff.
Strategies to Address Workforce Gaps Strategies include the programs, policies, and practices that enable an agency to recruit the	This is inconsistent with a key GAO principle of strategic workforce planning, as well as OPM workforce planning guidance. Both of these criteria emphasize the importance of developing strategies tailored to address workforce gaps, such as strategies for hiring staff. ³⁹
critical staff needed to achieve program goals. Strategies can act as a road map for an agency to move from the current to the future workforce needed to achieve program goals. Source: GAO. GAO-24-106108	Starting in fiscal year 2024, ASPR plans to hire 20 and 21 new staff in the first and second years, respectively, according to ASPR documentation. ASPR expects the initial 20 staff to be hired by April 2024. By September

³⁸The ASPR human capital office will have a total of 75 employees, including 34 current ASPR employees and the additional 41 new staff it plans to hire.

2024, ASPR officials expect that these new staff will be trained and ready

³⁹GAO-04-39 and Office of Program Management, Workforce Planning Guide. (Washington, D.C.: November 2022).

to take over the hiring and human capital services for intermittent responders currently provided by SROC. The remaining 21 staff, once hired and trained, will support the hiring and other human capital services SROC currently provides for other ASPR employees.⁴⁰

According to SROC officials, hiring specialized human capital staff will be key to ASPR successfully establishing its in-house hiring office. However, recruiting and hiring federal human capital staff is a challenge recognized by federal agencies and in our prior work. For example, in February 2023, we reported that recruiting and hiring human capital staff is particularly challenging due to a tight labor market and limited applicant pool, which has resulted in competition between federal agencies and with the private sector, according to human capital officers participating in a GAO-hosted forum.⁴¹ Further, in October 2022, OPM identified skills gaps in the federal workforce in five critical occupations, one of which was human capital.⁴²

We found that ASPR's transition documents for creating its new office do not include tailored strategies for recruiting and hiring the planned 41 human capital staff in the face of a government-wide shortage. For example, there is no strategy for addressing pay competition with the private sector and other federal agencies. ASPR documentation does include the following broad recruitment and hiring considerations: utilize available hiring flexibilities, consider recruiting and retention bonuses, assess the skills of existing staff in ASPR's Office of Human Capital, solicit interest from SROC staff, offer all positions as telework eligible, and advertise a select position as remote eligible. However, details on how ASPR will employ and tailor these considerations are lacking. For example, there is no detail on how many positions will be bonus eligible

⁴⁰The in-house hiring office will provide human capital services other than hiring such as benefits retirement and counseling, employee and labor relations, and records management, among others.

⁴¹See GAO, *Federal Workforce: OPM Advances Efforts to Close Government-wide Skills Gaps but Needs a Plan to Improve Its Own Capacity*, GAO-23-105528 (Washington, D.C.: Feb. 27, 2023) and GAO-23-106203.

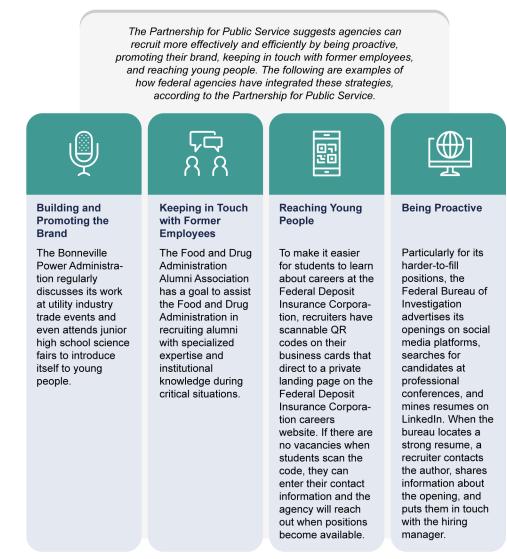
⁴²A skills gap may consist of an insufficient number of individuals or individuals without the appropriate skills, abilities, or behaviors to successfully perform the work. Since 2011, OPM—as the chief human resources agency and personnel policy manager for the federal government—has led efforts to close government-wide skills gaps, for example, identifying strategies for closing the gaps. However, as of October 2022, human resources specialists remain on OPM's list of occupations with government-wide skills gaps. Office of Personnel Management, *Closing Skills Gaps Initiative Closeout Report 2016-2020* (Washington, D.C.: October 2022).

or under what circumstances, nor how and when hiring flexibilities will be employed. Further, there are no planned monitoring tactics to determine if the bonuses or hiring flexibilities are effective.

Other agencies have taken actions to develop tailored recruitment and hiring strategies to address workforce gaps. For example, we reported in 2022 on the Food and Drug Administration's development and use of an outreach strategy, which included forming strategic partnerships and developing tailored, mission-oriented recruitment ads. Forming such relationships establishes a pipeline for talent and allowed the Food and Drug Administration to move beyond what stakeholders referred to as the "post and pray" approach. Under this approach, an employer posts a job with the hope that the qualified candidates will apply, without conducting additional recruitment efforts.⁴³

While the appropriate approach can vary and may be unique or specific depending on an agency's needs, figure 4 contains examples of tailored recruitment strategies that have worked for federal agencies. Further, see appendix II for OPM's action plan template. OPM recommends the creation of an action plan that details strategies to close workforce gaps, plans to implement the strategies, and measures for assessing strategic progress.

Figure 4: Examples of Recruitment Strategies in Practice across the Federal Government



Source: GAO summary of information from Partnership for Public Service; RaulAlmu/stock.adobe.com (illustrations). | GAO-24-106108

Note: The Partnership for Public Service is a nonprofit, nonpartisan organization with a mission to build a better government and stronger democracy. The organization does work related to federal talent, public service leadership, society's commitment to government, and the partnership, according to its 2023 impact report.

	According to ASPR officials, the transition documents for establishing the new office were prioritized over developing a plan with strategies to address workforce gaps. Developing tailored strategies to address government-wide shortages of human capital staff in order to meet the hiring needs of its new office would better position ASPR to be able to successfully address the challenge of recruiting and hiring 41 additional human capital staff. Without such strategies to recruit and hire its new staff, ASPR's efforts to establish this office are at risk. They may be delayed at best or unsuccessful at worst. Ultimately, this could leave ASPR with a workforce inadequately equipped to handle the next public health emergency.
ASPR Has Not Conducted Strategic, Agency-Wide Assessments of Its Workforce Needs	In February 2023, ASPR reorganized its structure as an agency to better support its mission, but the agency does not know how well its current or future workforce aligns with that mission. This is because ASPR has not, firstly, identified the critical areas in the agency that need workforce assessments. Secondly, ASPR has not conducted an agency-wide assessment—considering workforce needs identified by individual area assessments and available resources—to prioritize the skills and competencies of greatest need to achieve the agency's goals and mission. Conducting such assessments is a key principle, and an important first step, for conducting strategic workforce planning. ⁴⁴
	In place of conducting these workforce assessments, up until as recently as the time of our review, ASPR has generally determined its workforce needs through requests from each program office, rather than through a strategic, agency-wide workforce planning process that includes ASPR leadership, according to ASPR Office of Human Capital officials. Specifically, officials explained that hiring managers for each separate program office submit to ASPR's Office of Human Capital the positions to be filled based on each manager's determination of their needs. Hiring managers typically consider which positions are vacant and whether any changes are needed to these positions, such as different occupational series, or to hiring priorities based on changes in program office responsibilities, according to ASPR officials. ⁴⁵ Once each program office submits the positions, officials in ASPR's Office of Human Capital work

⁴⁴GAO-04-39.

⁴⁵According to OPM, an occupational series is a group of positions with similar specialized lines of work and qualification requirements. A grade is the numerical designation which identifies the difficulty, responsibility, and qualification requirements of a position (ranging from GS-1 through GS-15).

with officials in ASPR's Office of Finance to approve planned hires that are within ASPR's budget.⁴⁶ For example, each program office has a "ceiling" that represents the number of staff that can be supported within the budget for that office. Officials within the Office of Finance determine whether the number of staff requested is within that ceiling.

In December 2022, ASPR released the agency's 5-year strategic plan. The plan prioritized strategic workforce planning, establishing it as one of four agency goals. This workforce planning goal is to "ensure workforce readiness through the development of innovative workforce practices." As part of this goal, ASPR's strategic plan stated that the agency intends to conduct workforce assessments to identify critical skills and competencies needed to achieve the agency's goals.

ASPR has thus far taken steps to assess the skills, competencies, and associated gaps in three areas.

- Acquisitions staff. This assessment was a priority of the Assistant Secretary for Preparedness and Response as acquisitions became a significant responsibility for ASPR during the COVID-19 pandemic, according to officials. ASPR used a contractor to conduct this assessment. Specifically, the contractor analyzed ASPR's workforce data and contract spending, compared the acquisitions workload and staffing of comparable agencies to ASPR's acquisitions workload and staffing, and identified gaps in ASPR's current acquisitions staff. The results were provided to ASPR in April 2022 and identified significant gaps. For example, the contractor identified a gap of 165 GS-1102s (a contracting series that includes positions such as contract specialists, contract administrators, and contract negotiators) and 431 contracting officer representatives.⁴⁷
- Office of Industrial Base Management and Supply Chain staff. In response to a prior GAO recommendation, ASPR officials conducted a workforce assessment of its new Office of Industrial Base Management and Supply Chain in early calendar year 2023.

⁴⁶This office was known as the Division of Finance until February 2023.

⁴⁷Contracting officer representatives are officials who are authorized to perform specific technical or administrative contract functions, such as monitoring the contract and providing technical guidance. Contracting officer representatives may not provide guidance on anything that would cause a change to the contract's cost, schedule, or performance requirements.

According to a February 2023 decisions memo, the office will need to hire an additional 39 staff.⁴⁸

• Office of the Administration staff. In January 2023, ASPR's Office of Administration started a pilot workforce planning effort that is intended to help the office adapt to demographic changes and talent scarcity. It is also intended to identify skill gaps and training needs, among other benefits, according to ASPR officials. For this pilot, officials stated that throughout 2023 they conducted facilitated sessions with stakeholders to identify positions that are immediate, critical, vulnerable, or future. They also developed a position inventory, including criteria and requirements for positions in the inventory, among other activities.

However, ASPR officials had not yet identified additional critical areas in need of workforce assessments. This is inconsistent with a key principle of strategic workforce planning, which states that agencies should identify the skills and competencies needed for their current and future workforce in the areas most critical to achieving the agencies' goals.⁴⁹

ASPR Office of Human Capital officials did not provide further details on plans for assessments, except they stated that if the Office of the Administration's workforce planning pilot was successful, the effort could be replicated across ASPR. Officials also told us that they are waiting until the agency's new hiring office is fully staffed and established—which, as noted above, officials estimate will occur in October 2025. They had concerns about committing to completing any workforce assessments before the in-house hiring office was established in case there were resource constraints. Thus, it will be at least 2.5 years after ASPR

⁴⁸According to ASPR officials, officials in the Office of Industrial Base Management and Supply Chain identified critical skills and competencies to support the office by evaluating the current and future portfolio of work. Based on the current workforce numbers, volume of active and expected contracts, and necessary critical skills and competencies, additional hiring needs and positions were identified, per a February 2023 decision memo. In April 2022, we recommended that ASPR conduct a workforce assessment of this office (known as the Industrial Base Expansion Office prior to February 2023) to determine the critical skills and competencies needed for the office and develop corresponding workforce strategies to address those needs. Taking this action addressed the first part of the recommendation—determining the critical skills and competencies needed. As of November 2023, this recommendation remains partially implemented. See GAO-22-105397.

⁴⁹When identifying the skills and competencies needed for their future workforce, agencies do not need to define all skills and competencies; rather, agencies may focus their analysis on those areas most critical to achieving their goals. For more information see GAO-04-39.

announced its reorganization—in February 2023—until the hiring office may conduct these assessments.

By identifying the critical areas that need workforce assessments, and developing related plans to implement such assessments, before the agency's hiring office is fully established, the agency would have greater assurance that it can successfully achieve a priority identified by ASPR leadership in ASPR's 2022-2026 strategic plan: conducting workforce assessments. The process of planning these assessments could include determining which assessments need to be conducted; when assessments will be conducted; and the resources needed, such as utilizing current staff or contractors, or hiring additional staff. Moreover, the government-wide shortage of human capital staff could hinder ASPR's ability to meet its ambitious hiring timelines for its in-house hiring office and, therefore, delay these workforce assessments further, emphasizing the need for a plan in the near-term.

Not only is conducting individual workforce assessments for critical areas important, but agencies also need to look across the agency— considering workforce needs identified by individual assessments and available resources. Agencies should use this information to strategically assess, and then prioritize, the skills and competencies of greatest need to achieve the agency-wide goals and mission, as developed during the strategic planning process. This is according to a key principle of strategic workforce planning, which also states that if an agency identifies staff needs without linking the needs to strategic goals, the needs assessment may be incomplete and premature.⁵⁰ GAO-identified key practices for reorganization also emphasize that such strategic workforce planning is critical to successful agency reorganizations.⁵¹ However, ASPR officials could not tell us when such a strategic agency-wide assessment would be conducted.

By conducting an agency-wide workforce assessment—one that considers workforce needs identified by individual area assessments and available resources—to prioritize the skills and competencies of greatest need to achieve its agency-wide goals and mission, as identified in its strategic plan, ASPR will be better positioned to know that its hiring is supporting agency-wide goals, not only individual program goals. Further, it will be better able to identify its critical gaps and develop specific

⁵⁰GAO-04-39.

⁵¹GAO-18-427.

strategies to address them. Until ASPR looks strategically across its workforce needs agency-wide, the agency has no way of knowing the extent to which its current workforce can support its new organizational structure. For example, such analysis may reveal significant gaps in skills and competencies in the workforce or misalignment between workforce needs and critical skills that could affect the success of the reorganization moving forward. Ultimately, conducting an agency-wide workforce assessment will help ensure the agency is prepared to meet its mission leading the nation's medical and public health preparedness for, response to, and recovery from disasters and public health emergencies.

Conclusions

ASPR's recent reorganization, coupled with a strategic direction outlined in its strategic plan, provide ASPR with important building blocks as it begins to transform to meet its growing number of responsibilities in its role leading the nation's medical and public health preparedness for, response to, and recovery from disasters and public health emergencies. Nevertheless, the agency risks falling short of successful transformation in four areas.

- First, ASPR lacks specific goals and performance measures to use for its new hiring office once it is fully operational. Creating such goals and related performance measures would better position ASPR and stakeholders, including Congress, to ensure there is clarity around the goals of this new office, provide a framework for monitoring progress towards those goals, and allow ASPR to make adjustments if the goals are not being met.
- In addition, developing tailored recruiting and hiring strategies to address government-wide shortages of human capital staff, in order to hire the additional 41 human capital staff it requires for its new hiring office, would better position ASPR to establish this office as intended.
- Furthermore, although ASPR recently recognized the criticality of strategic workforce planning, it has not determined the critical workforce assessments that need to be completed. By identifying which assessments need to be conducted and developing related implementation plans before ASPR's hiring office is fully established in October 2025, ASPR will be better positioned to meet its strategic goal for 2022-2026. At a minimum, by taking such action ASPR will understand the resources and time needed for conducting such assessments, which the agency can use to inform important stakeholders, such as Congress.
- Finally, conducting an agency-wide workforce assessment that considers workforce needs identified by individual area assessments

and available resources, is paramount to ensuring critical skills and competencies across the agency are aligned with ASPR's strategic goals and overall mission. This identification is important for effectively prioritizing hiring needs across the agency, as opposed to piecemeal efforts by program offices, especially when resources are tight.
ASPR's stated goal for its reorganization was to better position the agency to be able to mobilize a coordinated national response more effectively and efficiently during future disasters and emergencies in close collaboration with other HHS agencies. However, if ASPR does not take the actions identified, it is missing key opportunities to improve its preparedness and may place the effectiveness of its reorganization at risk.
We are making the following four recommendations to the Assistant Secretary for Preparedness and Response:
The Assistant Secretary for Preparedness and Response should establish specific goals and related performance measures to use for its new in-house hiring office once it is fully operational. This could include goals and performance measures to help address areas of concern the new office was intended to address, including time-to-hire, service quality, and unique workforce needs. (Recommendation 1)
The Assistant Secretary for Preparedness and Response should develop tailored recruitment and hiring strategies to address government-wide shortages of human capital staff to meet the hiring needs of its in-house hiring office. (Recommendation 2)
The Assistant Secretary for Preparedness and Response should identify the critical areas that need workforce assessments and develop plans to implement such assessments, before its planned in-house hiring office is fully established. Such plans could include determining which assessments need to be conducted, when they will be conducted, and related resource needs. (Recommendation 3)
The Assistant Secretary for Preparedness and Response should conduct an agency-wide workforce assessment—that considers workforce needs identified by individual area assessments and available resources—to prioritize the skills and competencies of greatest need to achieve agency- wide goals and mission, as identified in its strategic plan. (Recommendation 4)

Agency Comments and Our Evaluation	We provided a draft of this report to HHS and OPM for review and comment. HHS's comments are reprinted in Appendix III. HHS also provided technical comments, which we incorporated as appropriate. OPM did not provide any comments.
	HHS neither agreed nor disagreed with our first recommendation that ASPR establish specific goals and related performance measures for its new in-house hiring office. HHS stated that ASPR has identified goals and performance measures for this office. For example, ASPR has a transition plan that includes goals and measures for establishing its new hiring office. We acknowledge that a transition plan, with such elements, is important for helping to successfully establish the new office. However, these efforts are different from our recommendation, which relates to the office's performance—once it is operational. We modified the language of the recommendation and related text in the report to make this point clearer. Moreover, HHS also stated that ASPR is developing a 10- business-day workflow to issue tentative job offers to select candidates for three position types. According to HHS, this would result in an 80 percent decrease in time-to-hire for these positions. However, we did not include this 80 percent goal in our final report; ASPR officials told us in August and reconfirmed in October 2023 that this goal was no longer feasible, because of SROC's improved hiring times over the course of 2022. Implementing our recommendation will help clarify the goal or goals of this new office, provide a framework for monitoring progress towards those goals, and allow ASPR to make adjustments if the goals are not being met. Ultimately, it will support ASPR's efforts to realize its estimated annual cost-savings goal of \$7 million for the new office.
	HHS neither agreed nor disagreed with our second recommendation that ASPR develop tailored recruitment and hiring strategies to address government-wide shortages of human capital staff to meet the hiring needs of its in-house hiring office. HHS reiterated ASPR's plans to hire an additional 41 staff for its new office and the broad recruitment and hiring considerations that we described in our report. These efforts notwithstanding, implementing our recommendation to develop tailored strategies will better position ASPR to successfully recruit and hire the planned 41 human capital staff for its new hiring office.
	HHS concurred with our recommendation that ASPR identify the critical areas that need workforce assessments and develop implementation plans before its in-house hiring office is fully established. HHS stated that ASPR will continue to support workforce assessment efforts to address our recommendation. HHS reiterated that ASPR has completed such

assessments in some areas, such as for its Office of Industrial Base Management and Supply Chain, as we reported.

HHS also concurred with our recommendation that ASPR conduct an agency-wide workforce assessment. HHS stated that as part of ASPR's existing strategic goal to ensure workforce readiness through development of innovative workplace practices, ASPR continues to focus on conducting an agency-wide workforce assessment to identify critical skills and competencies required to support and serve ASPR's mission. HHS reiterated the workforce assessments efforts that we included in this report, such as ASPR's Office of Administration pilot workforce planning effort.

Lastly, in its comments, HHS noted that as ASPR continues efforts to finalize and implement the Administration's internal human resources function, this report may not fully reflect the totality of activities and assessments that have occurred since we began the audit in 2022. Throughout the course of our review, which ran from June 2022 to November 2023, we repeatedly met with HHS officials, including ASPR and SROC officials, to request the most recent information officials could provide related to our reporting objectives.

We are sending copies of this report to the appropriate congressional committees, the Secretary of Health and Human Services, and other interested parties. In addition, the report will be available at no charge on the GAO website at http://www.gao.gov.

If you or your staff have any questions about this report, please contact me at (202) 512-7114 or DeniganMacauleyM@gao.gov. Contact points for our Offices of Congressional Relations and Public Affairs may be found on the last page of this report. GAO staff who made key contributions to this report are listed in appendix III.

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Mary Denigan-Macauley Director, Health Care

List of Committees

The Honorable Patty Murray Chair The Honorable Susan Collins Vice Chair Committee on Appropriations United States Senate

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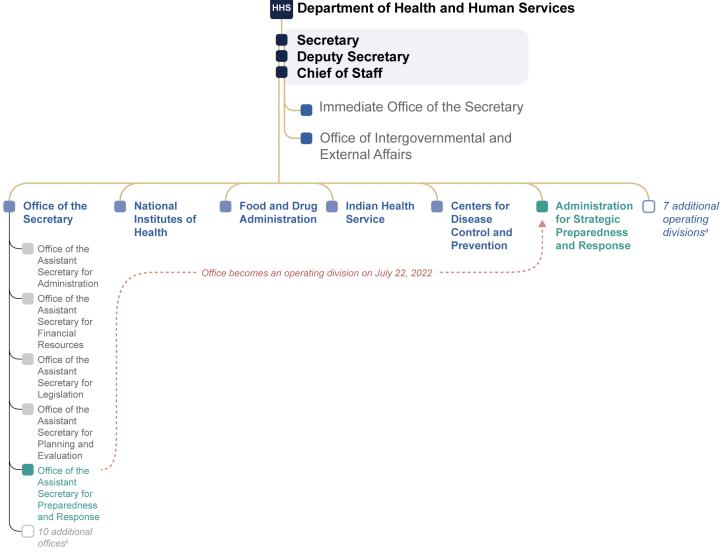
The Honorable James Comer Chairman The Honorable Jamie Raskin Ranking Member Committee on Oversight and Accountability House of Representatives

The Honorable Jason Smith Chairman The Honorable Richard Neal Ranking Member Committee on Ways and Means House of Representatives

Appendix I: Administration for Strategic Preparedness and Response Organizational Chart before and after Reorganization

On July 22, 2022, in light of the Administration for Strategic Preparedness and Response's (ASPR) increasing responsibilities, the Secretary of Health and Human Services (HHS) announced organizational changes designed to increase ASPR's ability to quickly and effectively mobilize the federal response to public health emergencies. These changes included ASPR's elevation from a staff division to an operating division. (See fig. 5.) Appendix I: Administration for Strategic Preparedness and Response Organizational Chart before and after Reorganization

Figure 5: HHS Organizational Structure Prior to and Since Elevation of ASPR to an Operating Division on July 22, 2022



Source: Department of Health and Human Services (HHS) documentation. | GAO-24-106108

^aAs of July 22, 2022, there are 12 operating divisions within HHS, including the Administration for Strategic Preparedness and Response (ASPR). In addition to the operating divisions shown above, the seven other HHS operating divisions are the Administration for Children and Families, the Administration for Community Living, the Agency for Healthcare Research and Quality, the Agency for Toxic Substances and Disease Registry, the Health Resources and Services Administration, the Centers for Medicare & Medicaid Services, and the Substance Abuse and Mental Health Services Administration.

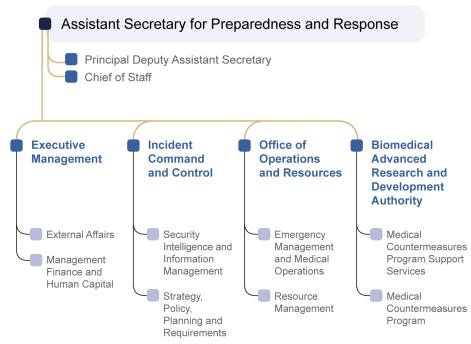
^bThe Office of the Secretary, HHS's chief policy officer and general manager, administers and oversees the organization, its programs, and its activities. As of July 22, 2022, there are 14 offices under the HHS Office of the Secretary, four of which are included in the figure above. The other 10 HHS offices are the Offices of the Assistant Secretary for Public Affairs, the Assistant Secretary for

Appendix I: Administration for Strategic Preparedness and Response Organizational Chart before and after Reorganization

Health, the General Counsel, Global Affairs, Inspector General, Medicare Hearings and Appeals, the National Coordinator for Health Information Technology, Office for Civil Rights, the Departmental Appeals Board, and the HHS Chief Information Officer.

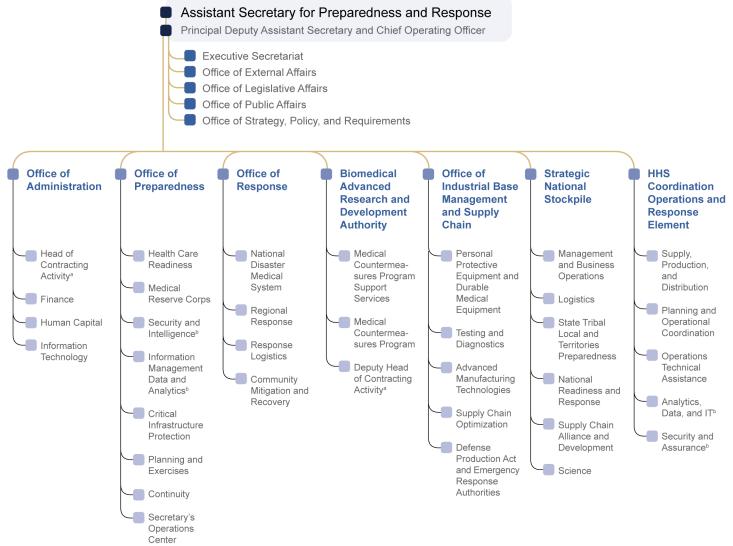
In addition, as part of this effort, on February 11, 2023, ASPR's organizational structure was updated. According to the Assistant Secretary for Preparedness and Response, the reorganization was to account for the agency's expanded mission and new capabilities and to create clear and straightforward naming conventions for its programs. Figures 6 and 7 show ASPR's organizational structure before and after the reorganization effort.

Figure 6: ASPR's Organizational Structure Prior to Reorganization That Occurred on February 11, 2023



Source: Assistant Secretary for Preparedness and Response (ASPR) documentation. | GAO-24-106108

Figure 7: ASPR's Organizational Structure after Reorganization That Occurred on February 11, 2023



Source: Assistant Secretary for Preparedness and Response (ASPR) documentation. | GAO-24-106108

^aThe Deputy Head of Contracting Activity is part of the Office of Administration and the Biomedical Advanced Research and Development Authority.

^bThe offices of Analytics and Security and Assurance are under the Office of Preparedness. However, they also support the Department of Health and Human Services (HHS) Coordination Operations and Response Element.

Appendix II: Office of Personnel Management's Workforce Planning Action Plan Template for Federal Agencies

In November 2022, the Office of Personnel Management released its Workforce Planning Guide as a resource for agency officials involved in analyzing their workforce, identifying gaps, and planning and implementing workforce action planning efforts. The guide included an action plan template, which is depicted in figure 8 below.

Figure 8: Office of Personnel Management Workforce Planning Action Plan Template

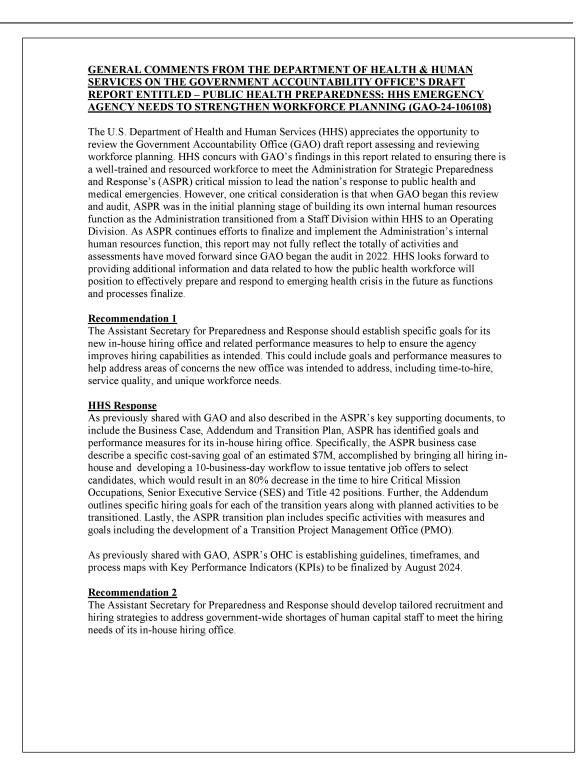
Workforce Planning Action Plan Template				
Workforce Planni	ng Initiative:	Date / Perio	od of Time Covered:	
Describe the driver(s) for workforce planning. (Mandate, major change in workforce agency, employee need/desire, automation, etc.) What is the problem being addressed?				
Describe the objectives and goals.				
Describe the barriers to workforce planning and the cause of them.				
Describe what is causing the barrier/problem (i.e., What is the root cause?).				
Define success or the desired outcome upon completion of the workforce plan.				
Primary Action Planning Team				
Lead:				
Members:				
Action Steps				
Actions to be Taken	Key Deliverable / Output	Start Date/ End Date	Responsible Party (Parties)	Budget, Resources.

Actions to be Taken	Key Deliverable / Output	Start Date/ End Date	Responsible Party (Parties)	Budget, Resources, and Approvals Needed

Source: Office of Personnel Management. | GAO-24-106108

Appendix III: Comments from the Department of Health and Human Services

HANN SERVICES OF HEALTH &	HUMAN SERVICES	OFFICE OF THE SECRETARY
Chine wara		Assistant Secretary for Legislation Washington, DC 20201
	December 15, 2023	
Mary Denigan-Macauley Director, Health Care U.S. Government Accountability Of 441 G Street NW Washington, DC 20548	fice	
Dear Ms. Denigan-Macauley:		
Attached are comments on the U.S. 'PUBLIC HEALTH PREPARED Workforce Planning" (GAO-24-10	NESS: HHS Emerge	ability Office's (GAO) report entitled, ency Agency Needs to Strengthen
The Department appreciates the opp	ortunity to review this	s report prior to publication.
	Sincerely,	
	Melanie	Anne Gorin
		e Egorin, PhD cretary for Legislation
Attachment		







Appendix IV: GAO Contact and Staff Acknowledgments

GAO Contact	Mary Denigan-Macauley, (202) 512-7114 or DeniganMacauleyM@gao.gov
Staff Acknowledgments	In addition to the individual named above, Deirdre Gleeson Brown (Assistant Director), Mandy Pusey (Analyst-in-Charge), Caroline Hale, Emma Hultgren, Mary Kubinski, and Abby Marcus made key contributions to this report. Also contributing were Kaitlin Farquharson, Jenny Rudisill, Laurie Pachter, and Ethiene Salgado-Rodriguez.

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Strategic Planning and External Liaison	Stephen J. Sanford, Managing Director, spel@gao.gov, (202) 512-4707 U.S. Government Accountability Office, 441 G Street NW, Room 7814, Washington, DC 20548