THE EVALUATION OF NIH INTRAMURAL MANDATORY TRAINING

FINAL REPORT

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Program Background

There is currently no singular mandatory training program at the NIH. Mandatory training is offered as individual courses or in segments, rather than a well integrated package. Multiple business owners are responsible for administering various training without any overall coordination or collaboration. The requirements that offices have created for their staff have been based on a narrow view of specific needs with little consideration of how each training would impact the overall requirement for the employee, resulting in increased burden on intramural staff.

In 2007, the NIH Mandatory Training Committee (MTC) was formed at the request of the NIH Deputy Director for Management (DDM) in response to concerns expressed by staff about the amount and effectiveness of mandatory training. The MTC was tasked to identify and recommend solutions to increase awareness of mandatory training requirements as well as streamline the content and delivery of training.

Study Purpose

The purpose of this study was to evaluate the mandatory training required for NIH intramural staff in order to determine how the NIH can streamline the training, while maintaining effectiveness and meeting regulatory and program requirements.

Study Design & Methods

The study team employed a number of data gathering and analysis methods:

- Reviewed 39 mandatory training courses, identified by the MTC as those that had significant impact on intramural scientific staff, for regulatory and content streamlining recommendations.
- Interviewed business owners to better understand how training is developed and delivered.
- Distributed an electronic questionnaire to the intramural scientific and administrative staff (2,614 responses analyzed) to collect improvement ideas and perceptions.
- Conducted 7 focus groups (1 with administrative participants) to identify patterns and themes exhibited by intramural staff.
- Researched best practices to integrate with recommendations.

Key Findings

The major findings of the study that helped in the development of the recommendations include:

- Identifying, accessing, and tracking courses is extremely difficult without the use of one central site. These issues, in addition to non-targeted, confusing communications about training, cause frustration and loss of productivity.
- Refresher training are delivered in a disjointed fashion creating content that is too long, complex or redundant, causing confusion about requirements, and resulting in an excessive delivery frequency.
- Training design does not always support effective learning and includes patterns of irrelevant content, poor navigation, and poor instructional design.
- Intramural staff would like options to test out of refresher training and would like opportunities to provide feedback.

Conclusions/Recommendations

The recommendations following from this study are:

1.) Create a single site for mandatory training that all staff can access.
2.) Develop a standard approach to analyzing, designing, and delivering refresher training.
3.) Implement NIH-wide online training standards to ensure development of effective and efficient on-line training.
4.) Implement NIH-wide minimum training evaluation standards that include both formative and summative methods to ensure that training products are effective.
5.) Create an NIH Training Coordinator Network consisting of an NIH-wide Coordinator and a Coordinator at each IC, to promote effective communication and collaboration.