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In Perspective: A Message from Dr. Nicole Lurie

Thank you for an amazing year. We've worked hard, shared some incredible experiences, helped countless people through our work, and learned a lot along the way. Frequently at the beginning of a year we think about what we want to accomplish in the coming year, how we'll make it happen and evaluate

the underlying values that drive our actions. While we are moving forward on many of those issues related to our preparedness and response missions, we have also been really serious about working on our ASPR culture.

As many of you know, as part of our strategic planning process, our staff has been



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ASPR Monitors Cholera Outbreak in Haiti



THE INTERNATIONAL COMMUNITY CONTINUES TO support the Haiti Department of Public Health and Population response to a cholera outbreak in Haiti.

In October, a CDC report matched the Haiti cholera strain to a commonly-found South Asian strain. As of Dec. 21, the Haiti Department of Public Health and Population reported more than 117,500 cases of cholera with

more than 60,600 hospitalized and more than 2,500 deaths.

Throughout the event, ASPR has leaned forward to be prepared should the U.S. be asked to support a broader health and medical response in Haiti. When USAID requested 25 interagency diarrheal disease kits for use in treating patients in Haiti, ASPR's OPEO logistics was able to respond immediately. Each kit can treat 100 to 400 cases, depending on case severity.

OPEO also identified six medical teams from the NDMS and PHS who could augment a cholera treatment center should HHS be requested to support. Each augmentation team has 30 healthcare providers who would support a treatment center, but not run one.

CDC has deployed personnel to support USAID in the cholera response, in addition to

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Dr. Lurie cont. from page 1

working hard to define a set of organizational values and to articulate the shared ways in which we will live up to them.

You have heard me say again and again that ASPR has an amazing story to tell. In order to tell it well we have agree on what our priorities are and what we are charged to do. Then together we need to determine how the work will get done to implement those priorities and what kind of organization we need to achieve our mission.

The NHSS laid out the philosophy and national priorities for health security and we are using the NHSS to guide the development of ASPR's scope, strategies, and priorities. The Annenberg fellows and the ASPR cohort in the Emerging Leaders Program began this process by looking at the way we operate here in ASPR on a day-to-day basis.

The senior leaders met off site to explore and refine the values and behaviors. We then took the work of senior leadership and opened up the conversation to ASPR as a whole. About 100 ASPR employees participated, and I want to thank everyone for taking three hours out of your busy day for an intense and incredibly important discussion.

The values we discussed reflect behaviors that I think are important to achieving our mission and to making ASPR an awesome place to work:

Being innovative – good outcomes are often the product of taking prudent risks and learning from mistakes.

Speaking up – good ideas come from everywhere.

Acting as "one ASPR" we all share values, resources, information, and work toward the same mission. We are all on the same team - anyone in ASPR can talk to anyone else in ASPR, no prior notice or permission needed. Communication is not effective when constrained by an organizational chart or rank; it has to be up, down, diagonal, sideways, all ways, always. It's also important to circle back and share our discussions with others on our team so all benefit.

Supporting and respecting one another. Ask for support when we need it. Treat every person with respect, all the time.

Keeping a spirit of service in all we do. It begins with the question "How can I help?"

We asked for broader comments on these organizational values from everyone using the ASPR Knowledgebase, and this month we are synthesizing that feedback. I expect that these values will be finalized in January.

Then the harder part begins: values are demonstrated by behaviors - how we behave and how we treat each other and our partners. Once we agree to a shared set of values, we must hold ourselves and each other accountable for demonstrating those principles. I have already found the draft values to be helpful in that regard, recognizing people for the day to day behaviors that embody them—and politely pointing out behaviors I see as inconsistent with those values.

By working through, agreeing on, and living by a common set of values we can ensure a culture in APSR where everyone is heard, valued and respected. Our people make our mission possible—and are values help ensure that our staff are at their best, and are fulfilled by their work.

I look forward to working with everyone on making ASPR the best organization it can be. I wish you all great holiday season and Happy New Year.

Haiti cont. from page 1

the personnel deployed to Haiti in an ongoing public health surveillance mission after the earthquake. CDC continues data collection for case control studies.

Since the outbreak began, the Haitian government and international partners have established more than 160 cholera treatment centers throughout Haiti, including 10 funded by USAID. Hundreds of volunteers from the Haitian Red Cross Society branches are receiving training on hygiene promo-

tion and are taking part in cholera prevention awareness-raising activities in schools, communal areas and markets throughout the country.

USAID is supporting the training of nearly 7,500 hygiene promoters in all of Haiti's ten departments to ensure the dissemination of key messages and availability of training in priority areas throughout the country. USAID also provided a grant for a program called Health/WASH which will benefit 1.3 million people through cholera

treatment centers, Mobile Medical Units and oral rehydration posts in rural areas.

Approximately 82 percent of water tanks and bladders in Port au Prince are now reaching the minimum standard for residual chlorine set by the Haitian government's National Direction for Potable Water and Sanitation, and 52 percent of tests at the household level in Port au Prince achieved the minimum standard for residual chlorine.

Strides made during GHSI Ministerial Summit

By Alison Laffan and Maria Julia Marinissen

Secretary Sebelius, accompanied by Dr. Lurie and staff from the ASPR/OPP Division of International Health Security and HHS officials from OGHA, ASPA and NVPO, participated in the eleventh GHSI Ministerial Meeting of the Global Health Security Initiative (GHSI) Dec. 2-3.



Left to right: Alison Laffan, Maria Julia Marinissen, Nicole Lurie, Bruce Gellin, Guillermo Avilés-Mendoza, and Michala Koch were among participants representing HHS at the GHSI event in Mexico City.

During the sum-

mit, Secretary Sebelius met with Ministers/Secretaries of Health from Canada, France, Germany, Japan, Italy, Mexico, the United Kingdom, the European Commission and the World Health Organization.

Together, they reaffirmed their commitment to work together to enhance their respective countries and organizations' capacities to prepare for and respond to health threats posed by chemical, biological and radionuclear (CBRN) terrorism and pandemic influenza, and to undertake concerted action to strengthen health security globally.

After an extensive report from the GHSI Pandemic Influenza Working Group, they discussed applying the lessons learned from the 2009 H1N1 pandemic to improve preparedness for all health threats.

The areas of future work include establishing a framework for collaborating on medical countermeasures, enhancing laboratory diagnostics capacity, developing effective communication strategies in the face of uncertainty during public health event, and continuing the support to the implementation of the WHO's International Health Regulations.

City. but also on communicating with GHSI partners and other international players to coordinate the international response.

Secretary Sebelius

and her counter-

parts participated in a facilitated dis-

cussion on public

messaging during

phase of a public

health emergency.

The exercise was

designed to chal-

lenge ministers not

only on communi-

cating directly with the public and the

press when the na-

ture of the threat

agent is unknown

the

uncertainty

During the exercise and based on the lessons learned from the 2009 H1N1 pandemic, Secretary Sebelius and Dr. Lurie highlighted the need to develop core capabilities among the GHSI partners to be able to respond quickly and more efficiently to international public health emergencies, including the need for pre-existing agreements for mutual assistance in particular in the area of medical countermeasures.

After presentations from Dr. Lurie and senior officials from the U.K. and Canada on the accomplishment of GHSI during the last 10 years, Secretary Sebelius acknowledged that this initiative has facilitated the international communications during the response to H1N1, and the sharing of scientific knowledge, experience and technical skills and the mutual understanding of our planning and response capabilities to public health emergencies.

All ministers agreed on and stressed the value of the scientific collaboration, brainstorming and problem-solving approach within GHSI that has allowed all members to improve their domestic preparedness as a result of this international interaction.

First Operational-Level Earthquake Plan with Regional Focus

ASPR DIVISION OF PREPAREDNESS Planning staff members are developing the first operational-level plan for public health and medical response to a New Madrid fault line catastrophic earthquake in the United States.

"We're tackling tough issues in this plan, like crisis standards of care and mass fatality support," explained Senior Program Analyst Lauren Toomey. "Planning ahead realistically for a catastrophe of this magnitude requires

unconventional thinking, especially given the sensitivities surrounding these topics."

The plan development supports the most comprehensive and complex catastrophic disaster planning endeavors undertaken in the U.S., involving eight states in four FEMA regions.

The New Madrid Seismic Zone encompasses a 150-mile fault system in the central Mississippi Valley. Modeling data shows approximately 82,000 of the seven million people in the New Madrid zone would sustain injury, with up to 3,500 fatalities.

In 1811-1812, three earthquakes with magnitudes between 7.5 and 8.0 struck the area over a three-month period. The U.S. Geological Survey estimates a 25-40 percent chance that an earthquake of 6.0 or greater magnitude will strike again within 50 years and a 7-10 percent chance that



the 1811-1812 earthquake sequence will occur again within 50 years.

Building on lessons learned from the U.S. response to the 2010 Haiti earthquake, ASPR's first operational-level plan is focused at the regional level and will encompass medical sheltering, pediatric care, behavioral health, animal care, mass casualty and mass fatality support.

The plan identifies key decision points and actions by ESF-8, such as operations, logistics, tactical planning, force deployment, and adjudication and allocation of scarce resources in such a catastrophe.

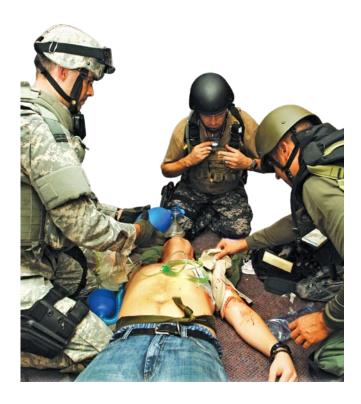
In planning sessions with regional emergency coordinators and interagency tabletop exercises, state and local agencies identified resources gaps which federal resources will be requested to fill.

"This has been a great collaborative endeavor, engaging both intra- and interagency partners; bringing together federal, state and local agencies," Toomey said. "The approach will make this plan an excellent model for future operational-level plans to support other hazards.

The draft plan could be ready as early as the end of December and will be tested during the National Level Exercise (NLE 2011) next spring.

ASPR IS PLEASED TO PRESENT: 5th Annual PHEMCE Stakeholders Workshop & BARDA Industry Day Event Date: January 10-12, 2010 www.medicalcountermeasures.gov

CONTOMS Celebrates 20 Years of Unique Training



LAW ENFORCEMENT IS A DANGEROUS OCCUPATION, AND THE need for medical support during special operations is widely recognized. What you may not have realized is that HHS plays an important role in ensuring that medical personnel can provide frontline medical care during these operations.

Meet CONTOMS: the Counter Narcotics & Terrorism Operational Medical Support Program.

CONTOMS, mainly through its flagship 56-hour EMT-tactical course, trains medical personnel to be frontline providers. Participants learn how to provide medical care effectively during an operation without becoming a liability to the rest of the tactical team or to themselves.

According to CONTOMS Medical Director Dr. Denis FitzGerald, people with at least a basic EMT certification have the necessary medical skills to support law enforcement, and CONTOMS teaches them to apply those medical skills in military, disaster, and law enforcement settings. HHS, with its health and medical expertise, plays a key role in providing the training.

Co-sponsored by HHS, the U.S. Department of Homeland Security, and the U.S. Park Police, the CONTOMS program has provided nationally recognized, evidence-based training to more than 7,000 personnel since its inception in 1990.

Participants must be sponsored by a bona fide law enforcement agency, military unit or other specialized team and pay a nominal fee to cover costs of the course. Even with this stipulation, CONTOMS receives about twice as many applicants as there are openings in the class.

FitzGerald attributes much of the success to the way the program is structured with classroom as well as field training that simulates the real-world situations encountered by law enforcement officers.

"We do our best to accept a balanced class with a wide range of experience," he explained. "We also structure the teams so that they can be challenged in their weak areas but share their strengths. They learn from each other."

FitzGerald hopes to build on that success by continuing to provide training to a variety of agencies across all levels of government. Additionally, he is always looking to improve upon an already strong curriculum.

"We hope to expand the spectrum of training and eventually add an advanced course that would provide more depth and content beyond what is currently offered in the week-long course," he said.



It is clear that after 20 years, CONTOMS is still going strong. And with its vital contributions to frontline medical care, proven track record, and continued improvements, the future ahead looks bright.

If you or someone you know is interested in CONTOMS training, visit www.trueresearch.org/contoms.

ASPR November Spotlight Award Trish Ondo



TRISHA ONDO, PMP, IS THE DYONYX program manager responsible for the application development and maintenance of the www.Medicalcountermeasures.gov website and the implementation of electronic document

management, program management, and collaboration software for BARDA.

Ms. Ondo provided exceptional customer service to the BARDA teams that are planning the nascent "portfolio management" initiatives and PHEMCE Stakeholder Workshop. These initiatives help BARDA manage projects in a unified way and enhance communication with internal and external stakeholders.

Ms. Ondo has extensive experience in managing various software and process development and implementation projects and teams through all phases of the software life cycle in government and commercial industries.

She has led the implementation of MS Project Server for the Millennium Challenge Corporation (MCC), led the analysis and development of acquisition processes for the Federal Technology Services National Capital Region (FTS/NCR), and led the Nextel Partners transition to a new billing system and customer billing interfaces.

Additionally, she has led software development releases for MCI/WorldCom and AT&T. Her experience includes management of software implementations across the globe at military installations for the Army Housing Operations Management Systems and managing the 24-hour customer support desk for these applications.

Take Advantage of Team Building Resources

WOULD YOU INVEST 4 HOURS OF A WORK day if you thought it would improve your team's performance? The Department of Administrative Management (DAM) did!

This October, the Organizational and Employee Development (OED) Branch conducted a half-day team building session that encouraged DAM employees to focus on learning more about themselves and their teammates in order to work together more effectively. Team building evaluations from this session showed that 100% of all participants from

DAM staff were satisfied with the team building activities overall, would recommend this activity to others, and believe they know their team members better as a result of the training. Overall, 87 percent of the participants thought the team building session would result in their team performing together better in the future.

Other comments around the value of the team building session included (verbatim):

- "Different people can work together"
- "Relaxed environment"
- "Trust and Communication"
- "Working as a team"
- "Seeing different perspectives, camaraderie"

Team building sessions are designed to improve team performance and can include a wide range of activities. There are many reasons for initiating a teambuilding session including:

- Improving communication
- Motivating a team
- Getting to know each other
- Getting everyone "onto the same page", including goal setting

- Helping participants to learn more about themselves (strengths and weaknesses)
- Identifying and utilizing the strengths of team members
- Improving team productivity
- Practicing effective collaboration with team members

If you'd like to schedule a half-day team building session, contact OED Branch Chief Dr. Ed Oppler, 202-205-3976, edward.oppler@hhs.gov. Please keep in mind that larger groups will take longer to arrange than smaller groups.

Once scheduled, Dr. Dana Sims of OED will work with you to develop a fun and personalized team building session to address your team's challenges. Dana has nearly 10 years of experience researching team effectiveness and performance in both the public and private sectors.

Reflections on Leadership

By guest columnist Jay Petillo, Director of ASPR's Office of Financial Planning and Analysis

ON MY DESK IS A PAPERWEIGHT. I DON'T REALLY USE IT TO hold down papers but I like having it near-by to remind me one of the more rewarding experiences I've had as a father. It's a pretty simple paperweight. The bulk of it is a 2x2 black marble block the size of a post-it note with a bronze medallion embedded in it. On the medallion is an embossed picture of a basketball and a hoop. Below the medallion is a small brass plate that says "Flyers 2001, Thanks Coach Jay."

It was a gift from my eldest daughter's -- Halley -- basketball team, the Brookmont Flyers. That year they won the championship in the Montgomery County Recreational League 7th Grade Girls Basketball's Division -- West. They were triumphant with a record of 5-4 while every other team in Division West was 4-5. Player for player, they weren't all the most talented girls on the court, but they proved to be the best team.

In addition to bragging rights, what made it so worthwhile was the connection that Halley and I made throughout that season. Adolescent daughters can be a mystery to dads. Even more so when the dad is a stepdad as I am to Halley. For most of our time together during those years our relationship veered between guarded tolerance and confused mayhem. But during that season something clicked.

We worked together for a common goal, and realized an accomplishment neither one of us could have achieved on our own. I can still remember Halley beaming in the back seat of our old Jeep Cherokee after our championship win, without a prompt from me and maybe even surprising herself, saying "I'm just so happy we won." When I look at the paperweight it invariably triggers that memory, even in a small way.

Over the past year, I've been fortunate to benefit from another coaching experience. This time however, I am the one being coached. Like many of ASPR's executives, I have recognized the need for and embraced the challenge of becoming a better, more effective leader. Thankfully, ASPR has supported my commitment, by making one of its own and arranged for me to have an executive coach.

I have been familiar with executive or professional coaching for some time. As part of her own journey, my wife Rebecca endeavored to start a career in coaching and com-



pleted a rigorous certification program. Seeing the effort she put into it impressed upon me the care and discipline that is required of professional coaches.

Working with my own coach has reinforced this appreciation. My coach has made himself available everyday, and often at night, to help me identify the "leadership opportunities," that are hidden in the daily challenges that often present themselves as hair-on-fire crises.

Some of you may not know this about me, but I can be reactive, or even over-react when something unexpected comes my way. Who knows? — Maybe I was absent the day they taught impulse management in school. Having a coach has given me a buffer from making the hasty, kneejerk move. As long as I can identify when I may be making a rash decision or taking a reckless action, I can pause, call or email my coach, let him know what's going on and explore alternatives to my self-initiated, yet ill-advised planned responses.

Even just having a willing listener to confide in opens up the possibilities for any given situation. It gives me breathing room to ask what is really at stake and where might the opportunity lie hidden within the perceived crisis. It's a simple thing to pick up the phone, and often saves me more time and energy in the long-run that taking immediate action on the first thought that comes across my mind.

As nifty as the practical applications of having a coach can be, I've also come to value even more the bigger leader-

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Leadership cont. from page 7

ship picture my coach is helping me see. This past year has been an extended discussion on what makes for great leadership. There is no one right answer. However, I've come to grasp that in its most basic form, leadership is about building trust.

As I'm learning, this is easier said than done. Personally, I have more work to do in this area and recognize that it is an opportunity for life-long learning. Remarkably, it has quite often been the little things recently that have been most effective.

My FPA colleagues have offices in three out of five buildings occupied by ASPR staff in the Southwest Complex. Once a week I take the tunnels from Humphrey to Cohen and then to Switzer to visit FPA folks at their desk.

We talk about how their kids are doing in Cub Scouts, who's going to the Superbowl (The Giants!), where they're planning to go on vacation or holidays, and any other thing that's going on in their lives on that day.

It's fun. I enjoy it. And I have found that because we have had these pleasant conversations, when the

"In its most basic form, leadership is about building trust. Remarkably, it has quite often been the little things recently that have been most effective."

time comes to talk about more challenging things that directly impact our ability to carry out our mission, there is a greater level of comfort about speaking one's mind. Unlike our casual conversations, these workfocused discussions may not always be pleasant. However, having laid a foundation through personal interactions has made it easier to honestly speak about tough problems in our pursuit to find solutions.

Coaching has not just helped me but is supporting the development of my leadership team. For several months my deputies, Esmeralda Pereira, Corey Hewitt, Ajay Pillai, Wanda Savage, David Dolinsky and I have been meeting on a regular basis to develop FPA's own set of values, as well as define its mission, vision and purpose. It has been hard and sometimes tedious work.

However, early on the deputies were adamant about taking on the harder work of building a supportive community within FPA that would be the underpinning of great achievements and a tangible contribution to being part of something greater than ourselves. I found myself being inspired by their dedication.

As challenging as this past year has been, including responses to Haiti, the Gulf oil spill, managing the 2012 budget process and closing out 2010 under a new organizational structure, the deputies kept their commitment to this work. We also learned a great deal about each other, mostly that we are more alike than different in our experiences, interests and aspirations.

These commonalities were often realized during one of our frequent working lunches, which sometimes were

To Advance Your Leadership Skills:

- Talk with your supervisor about building leadership development into your IDP.
- Watch for announcements to apply for the Excellence in Government Fellows program offered by ASPR and the Partnership for Public Service.
- Take advantage of the HHS Mentoring Program — be a mentor, find a mentor, https://mentoring.hhs. gov/.

hosted by one of us who volunteered to prepare a meal for the group. We ate well, enjoyed each other's company and saw each other in a new and easy-going light. Not challenged by an immediate urgency, we allowed each other the time to focus on what was important. An added benefit from this overall experience is that the deputies have seen the value of coaching and now each has a coach that they meet with at least once a month.

Across ASPR, our jobs are rewarding but also can be very hard. This is no less true in FPA than in any other office. It is a source of tremendous gratitude that I get to work with the committed public servants that make up our financial management community. Together we are embracing the ASPR commitment to be a learning-growing organization. Like my daughter's basketball team through the efforts to "coach us up", we are on our way to being a championship caliber team.

Workforce Development

DIVISION OF WORKFORCE DEVELOPMENT

Visit the Workforce Development site on the ASPR Knowledgebase at https://aspr.hhs.gov/workforce/Pages/default.aspx for the latest announcements, project updates, and information regarding Human Resources, Organizational & Employee Development, Ethics, and U.S. Public Health Service.

Calendar Year Closeouts for PMAPs and IDPs

As the current calendar year draws to a close, it is time to get a jump start on closing out Performance Management Appraisal Plans (PMAPs) and Individual Development Plans (IDPs). Employees are encouraged to meet with their supervisor to closeout CY10 PMAPs and IDPs at the same time to consolidate meetings. DWD would like to receive all hard copies of IDPs and PMAPs by Friday, February 5, 2011. An overview of closeout details is provided below.

PMAPs

Closeout of CY10 PMAPs will follow standard procedures as in years past.

IDPs

This year, IDPs were completed using a new system in the ASPR Knowledgebase. We understand the IDP system was not as convenient and user-friendly as was intended. Employees are still encouraged to complete IDPs in the system; however, DWD will also accept signed printout copies. DWD will assume responsibility for printing all IDPs in the system that have a completion status of "7. IDP Completed."

Please refer to the user guides posted on the myIDP page for instructions on using the IDP system to complete your IDP calendar year closeout. For technical assistance with the IDP System, contact Kristie Huray (Kristie.Huray@hhs.gov, 202-205-8377).

Your DWD Human Resource POCs will be responsible for collecting PMAPs and IDPs for their assigned program offices.

If you have any questions regarding the process or need assistance with PMAPs or IDPs, please contact the following DWD personnel:

PMAPs: Sherri Franklin, 202-401-5841 (Switzer 3311) IDPs: Jonathan Johnson, 202-205-0964 (Switzer 5112)

DWD Sites and Systems in the ASPR Knowledgebase

ASPR Contacts

https://aspr.hhs.gov/asprcontacts

The ASPR Contact List has been established to ensure staff contact information is up-to-date and available in the event of an emergency. This system will be of great benefit to ASPR during incidents of national significance or emergency situations such as personal medical emergencies that may occur during normal work hours. All ASPR employees (government and contractors) are encouraged to update their contact information as soon as possible.

Project Information Management System (PIMS)

https://aspr.hhs.gov/workforce/PMIS%20Reports/Forms/AllItems.aspx

Stay up-to-date on Workforce Development projects with the Project Management Information System. View public reports that are posted online weekly.

Human Resources Personnel Action Tracking System (PATS)

https://aspr.hhs.gov/workforce/Documents/Forms/ AllItems.aspx

The HR Personnel Action Tracking System is used to track ASPR-wide personnel vacancy and recruiting actions. Public reports are generated bi-weekly and posted online to ensure supervisors and selecting officials receive accurate, up-to-date information.

ASPR Knowledgebase Training

A Relaxed Training Session on DWD Sites and Systems in the ASPR Knowledgebase will be offered to all ASPR staff in January 2011. Whether you are a new employee who is not familiar with the ASPR Knowledgebase or an existing employee in need of a refresher, learn how this useful Web-based tool can help you communicate better, increase transparency, and work more efficiently!

Additional details will be sent via e-mail, so be on the lookout. You won't want to miss this valuable learning opportunity!

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SES Performance Plans – Due Date Extended to Jan. 14

Oct. 1 marked the beginning of the FY 2011 performance cycle for Senior Executive Service (SES) members. The Office of the Assistant Secretary for Administration (ASA) is currently working with the Office of Personnel Management to review changes to our SES performance management system and to make final revisions to the SES Performance Form HHS-740 so the 2011 performance plans can be established.

ASA is tentatively scheduled to release the revised 2011 SES Performance Plan template and guidance during the week of Dec. 20. All SES members will be asked to establish their signed 2011 performance plans by January 14, 2011, the deadline set by ASA.

In preparation for receiving the revised form, ASA has advised OPDIVs and STAFFDIVS to firm up 2011 performance expectations so the forms can be completed when received. Dr. Lurie will be providing her 2011 ASPR Performance Plan for SES members to use in aligning their own plans.

Once this is finalized and the ASA guidance and 2011 Performance Plan template is released, DWD will release a formal guidance for ASPR SES members to complete their 2011 Performance Plan. DWD will also conduct one on one review sessions with each executive.

Please contact DWD POC Suba Jenkins at Subarnarekha. jenkins@hhs.gov with any questions.

Upcoming Supervisory Training

Are you a new supervisor within the federal service? Are there core skills that you, as a tenured supervisor, feel can be enhanced through training? Well, you are in luck. Based on the 2010 All Hands survey, we heard loud and clear that our supervisors were not provided enough training on the ASPR policies and procedures to assist them in effective implementation.

Further, we know that the transition into supervisory positions is sometimes a challenge in learning how to delegate, motivate teams, develop employees, and communicate with a wide range of personalities.

To answer the call for more training on core supervisory skills – from policies and procedures to leadership skills – the Division of Workforce Development (DWD) has partnered with Human Resources Research Organization (HumRRO) to develop a customized supervisory training program just for ASPR supervisors (for both new and experienced supervisors).

HumRRO met with 33 supervisors at all levels and all divisions of ASPR – including Dr. Lurie herself – to understand the needs of our leadership community. Keep an eye out for more information as we begin to set up the times and locations for the courses beginning early 2011.

A special thanks from DWD to all the ASPR supervisors who gave their time, thoughts, and insights to our Hum-RRO partners!

Join the conversation:

friend ASPR on **Facebook**, www.facebook.com/phegov

follow us on **Twitter**, www.twitter.com/phegov

check us out on **YouTube**www.youtube.com/phegov

