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| **[IC Name]** **Staff Transition Plan** |
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| **Ensuring Continuity During Transitions** |

Prepared by

[**Office Name**]

**What is Transition Planning?**

Transition planning is a systematic process that ensures the continuity of the Institute’s mission and scientific direction by developing a plan of action to transition work when a vacancy is anticipated or realized. This **Staff Transition Plan** will help your Division/Office ensure continuity of your position’s responsibilities in the event of a vacancy or unplanned transition. The purpose of this document is to collect information about your position, the duties that you regularly perform, and the professional network you maintain. While a Staff Transition Plan is recommended for ***all*** [Institute Name] positions, as anyone in any position can use this plan to assist with preparing for a seamless transition, it is particularly important that Key Position incumbents have a Staff Transition Plan and designated backup(s) in case of a vacancy or unexpected departure. All duties and responsibilities will be reassigned to the designated backup(s) unless otherwise reassigned in the tables below.

**The Staff Transition Plan is divided into the following sections**:

A) Position Overview

B) Transition Strategy

C) Professional Network Overview

D) Critical Actions for Next Steps

**What are the Benefits of Transition Planning?**

* Seamless staff transitions
* On-demand access to legacy knowledge
* Identification and development of talent capable of filling relevant openings created by departing employees

Staff Transition Plan

**A. Position Overview**

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| 1. Departing Incumbent’s Na- me |  |
| 2. Division/Office |  |
| 3. Lab or Branch |  |
| 4. Section or Team |  |
| 5. Position Title |  |
| 6. Official Supervisor |  |
| 7. Designated Backup |  |
| 8. Departure *(Temporary or Permanent)* |  |
| 9. Begin Date *(If Temporary)* |  |
| 10. Departure or End Date *(If Temporary)* |  |
| 11. Series |  |
| 12. Pay Plan |  |
| 13. Grade Level |  |
| 14. Security Clearance Required? |  |
| 15. Licenses/Certifications Required? |  |

**B. Transition Strategy**

**1. What are the core functions performed in your organizational unit?**

**2. What are the Key Duties and Activities performed by this position (e.g., Major Outputs, Key Decisions, Tasks Managed, Resources Managed), Standard Requests, Special Projects/Ad Hoc Requests, and Meeting/Committee Membership commitments that will require coverage?**

In the table below, document the responsibilities of your position and identify corresponding backups in the event that you leave your position. Reference your position description, PMAP, and browse MS Outlook to effectively capture the critical responsibilities and activities you perform. Insert additional rows as necessary.

* **Areas of Responsibility**: what is the task/activity/project (e.g., budgetary planning, annual reporting)?
* **Work Product and System/Tools Used to Perform Work**: what is the format of the final work product (e.g., article, report, briefing) and do you use any special computer programs or other tools (other than Microsoft Office)?
* **Customer/End User**: who receives or makes use of the work product (e.g., [Institute Name] leadership team, NIH stakeholders, Congress)?
* **Stakeholders to Consider:** who are the important stakeholders who should be considered?
* **Timeframe**: what time of year or how often do you complete this task (e.g., monthly, every June, bi-annually)?
* **Percent of your time**: what percent of your time do you spend on the task during the time of year you work on it?
* **If not going to a designated/selected backup, reassign to**: who would complete this task/activity/project in your absence? In addition to a) transitioning activities to one designated backup (i.e., a staff member designated to ‘act’ in the vacant position while it is being advertised and filled) or b) sharing duties across multiple backups, consider the following strategies: c) seek temporary contract support to cover position responsibilities that are not inherently governmental, or d) defer any non-critical work until the position is filled with a new incumbent.

**Key Duties and Activities performed** (e.g., Major Outputs, Key Decisions, Tasks Managed, Resources Managed) **that will require coverage**

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|  | Areas of Responsibility | Work Product and System/Tools Used to Perform Work | Customer/End User | Critical Stakeholders (e.g., strategic partners and collaborators) | Timeframe | Percent of Your Time | If not reassigned to your Designated Backup, Reassign to: |
| Ex. | Prepare Congressional Workforce Justification Report  | Annual written report – data retrieved from EDie system | Institute Director | Congress | Every December | 50% time Oct-Dec | Jane Doe (Deputy Director) |
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**Standard Requests for Support** (e.g., Recurring leadership requests)

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|  | Areas of Responsibility | Work Product and System/Tools Used to Perform Work | Customer/End User | Critical Stakeholders (e.g., strategic partners and collaborators) | Timeframe | Percent of Your Time | If not reassigned to your Designated Backup, Reassign to: |
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**Special Project Assignments/Ad Hoc Requests for Support** (e.g., Assignments resulting from working group/committee membership, frequent assistance provided as an Subject Matter Expert/Representative)

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|  | Areas of Responsibility | Work Product and System/Tools Used to Perform Work | Customer/End User | Critical Stakeholders (e.g., strategic partners and collaborators) | Timeframe | Percent of Your Time | If not reassigned to your Designated Backup, Reassign to: |
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**Key Meetings/Committees/Work Groups Attended**

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|  | Name of Meeting/Committee/Work Group | Objective(s) of Meeting/Committee/ Work Group | Incumbent’s Role | Meeting Schedule | If not reassigned to your Designated Backup, Reassign to: |
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**C. Professional Network Overview**

**Key Customers:** *Please list those individuals that you serve on a regular basis.*

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| Name and Title | Office | Nature/Purpose of Relationship & Other Notes |
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**Direct Reports:**  *Please list the individuals that you directly supervise/manage.*

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| Name and Title | Office | Nature/Purpose of Relationship & Other Notes |
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**Knowledge Sharing Network:**  *Please list those individuals in your knowledge sharing network (internal or external to* [Institute Name]*, other institutes, etc.)*

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| Name and Title | Office | Nature/Purpose of Relationship & Other Notes*(e.g., types of information shared, purpose of information, alternative sources)* |
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**Vendors/Service Providers:**  *Please list those vendors that you do business with, the contracting information, frequency of business (weekly, quarterly, annually), and note the nature of the relationship (e.g., software subscriptions, license agreements, office suppliers).*

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| Name and Title | Contracting Information | Nature/Purpose of Relationship & Other Notes |
| Ex. Jane Seymour, Harvard Gazette Magazine Sales Representative | Account #: 12345678-9 | Annual subscription, ends in December; Renew in October for 20% discount.  |
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**D. Critical Actions for Next Steps**

1. Submit your completed Staff Transition Plan to your supervisor for review and validation and attach any corresponding documents as appropriate.
2. Once approved by your supervisor, update your Staff Transition Plan on an annual basis (i.e., in conjunction with PMAP establishment), and/or as your roles or responsibilities change.
3. Talk to your supervisor about whether you should complete a Transition Planning Interview, see the Workforce Planning Toolkit for an interview guide.
4. Once the backup(s) or successor is identified, your supervisor may ask you to meet with the selected backup(s) or successor to ensure that he/she is adequately prepared, cross-trained, and supported to perform the roles described in this Staff Transition Plan.