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Lt. Governor (Sigundo Maga'låhi)

11/6/23

November 7, 2023

DEPARTMENT OF ADMINISTRATION ORGANIZATIONAL CIRCULAR NO. 2024-007

TO: All Department and Agency Heads
FROM: Director, Department of Administration
SUBJECT: TRAINING NEEDS ASSESSMENT SURVEY

Buenas yan Håfa Adai! The training responsibilities of the Department of Administration (DOA), are mandated by Title 5, §20302 and §20303 of the Guam Code Annotated. As such, DOA is conducting a Training Needs Assessment Survey of all Executive Branch line departments/agencies in support of the Governor's initiative to have a workforce trained and ready to meet the challenges facing our government.

The state of the government's finances, the military buildup and the condition of our local economy, require this government and its employees to be efficient and effective in the delivery of government services. As such, training is an essential and critical part of the overall human resources management function, so we must take a proactive approach in the development that government employees are trained and their skills enhanced by experts in the various fields of government services. Your support of this initiative will ensure a qualified and effective government of Guam work force. We request that you complete the attached form and submit it to the Department of Administration's Division of Human Resources, Training & Development Branch, ATTN: Patrick Artero or Pacita Uncangco by November 30, 2023. A copy of the compilation of training needs, by department, will be forwarded to the Governor and the Department of Labor for any possible funding assistance.

If you wish, a copy of the survey may be electronically sent to your department. Please contact Mr. Patrick Artero at (671)475-1294 or Ms. Pacita Uncangco at (671) 475-1219. Email: raymondpatrick.artero@doa.guam.gov or pacita.uncangco@doa.guam.gov.

Your cooperation, assistance and support is greatly appreciated.

for **EDWARD M. BIRN**

ATTACHMENTS

III. RESOURCES/LOGISTICS

Please indicate, using the scale below, the extent to which you think that each of the following factors will adversely impact your training decisions in Fiscal Year 2024.

LITTLE IMPACT → 1 2 3 4 5 ← MAJOR IMPACT

Training funding _____
 Length of time employees are off-site to receive training _____
 Changing priorities/directions from agency management _____
 Employee turnover _____
 Other: _____

What was your training budget last fiscal year? _____

What is your projected training budget for next fiscal year (e.g., 10% or less, 20%, more) _____

Comments/Notes about Resources and Logistics: _____

IV. TRAINING NEEDS ASSESSMENT SURVEY

The following section consists of Categories and Sub-Categories of training courses. Use the scale below to indicate the level of **IMPORTANCE** of the subject matter to your respective Department/Agency.

Under Column 3, '**ESTIMATED NO OF PARTICIPANTS**', please indicate the estimated number of employees that might attend each course.

Please indicate '**N/A**' (Not Applicable) for a Category that does not pertain to your Department/Agency

Unimportant → 1 2 3 4 5 ← Highly Important

			Level of Significance	Estimated No. of Participants
1	COMMUNICATIONS			
	Conflict Resolution		_____	_____
	Briefing/Meeting Skills		_____	_____
	Public Speaking		_____	_____
	Other: (Specify) _____		_____	_____
2	OFFICE PRODUCTIVITY/CUSTOMER SERVICE			
	Quality Customer Service		_____	_____
	Effective Office Management for AA's		_____	_____
	Conducting Effective Meetings		_____	_____
	Other: (Specify) _____		_____	_____
3	BUDGETS AND FINANCIAL MANAGEMENT			
	Accounting		_____	_____
	Budget Formulation		_____	_____
	Financial Management		_____	_____
	Other: (Specify) _____		_____	_____

IV. TRAINING NEEDS ASSESSMENT SURVEY (continued)

Unimportant → 1 2 3 4 5 ← Highly Important

Level of Significance

Estimated No. of
Participants

4 QUANTITATIVE AND ANALYTICAL SKILLS

Management Analysis

Planning Project Management

Program Analysis and Evaluation

Other: (Specify) _____

5 COMPUTER AND INFORMATION SCIENCES

Database Management

Microsoft Office Suite:

Word

Excel

PowerPoint

Other: (Specify) _____

6 GENERAL PERSONNEL MANAGEMENT

Recruitment

Employee Benefits

Other: (Specify) _____

7 POSITION CLASSIFICATION AND STAFFING

Creation of Position

Amendment of Positions

Other: (Specify) _____

8 PERFORMANCE MANAGEMENT

Work Planning & Performance Evaluation

Other: (Specify) _____

9 EMPLOYEE DEVELOPMENT

Instructor Training (Train-the-Trainer)

Apprenticeship Training

Other: (Specify) _____

10 LABOR & EMPLOYEE RELATIONS

Employee Grievance & Adverse Action

Sexual Harassment

Substance Abuse

Equal Employment

Other: (Specify) _____

V. TRAINING "WANTS" ASSESSMENT SURVEY

The following section consists of Categories that may or may not be currently offered. However, dependent upon the level of interest, they may be considered for future training courses.

Use the scale below to indicate the level of INTEREST of the subject matter relative to your respective Department/Agency.

Under Column 3 'ESTIMATED NO OF PARTICIPANTS', please indicate the estimated number of employees that may be interested in attending each course.

Please indicate 'N/A' (Not Applicable) for a Category that does not pertain to your Department/Agency

Not Interested → 1 2 3 4 5 ← Very Interested

	Level of Interest	Estimated No. of Participants
1. ACCOUNTING SKILLS	_____	_____
2. ASSERTIVENESS TRAINING	_____	_____
3. BUDGET FORMULATION	_____	_____
4. COMMUNITY FIRST AID / CPR & SAFETY TRAINING	_____	_____
5. EQUAL EMPLOYMENT OPPORTUNITY	_____	_____
6. CONFLICT RESOLUTION	_____	_____
7. DEALING WITH DIFFICULT PEOPLE	_____	_____
8. EFFECTIVE OFFICE MGMT FOR ADMIN ASSISTANTS	_____	_____
9. ETHICS IN GOVERNMENT	_____	_____
10. FINANCIAL MANAGEMENT	_____	_____
11. IMPROVING EMPLOYEE PERFORMANCE	_____	_____
12. MANAGING EMOTIONS IN THE WORKPLACE	_____	_____
13. PERSONAL EMPOWERMENT	_____	_____
PREPARING & CONDUCTING PERFORMANCE	_____	_____
14. EVALUATIONS	_____	_____
15. PROCUREMENT REGULATIONS & PROCEDURES	_____	_____
16. PUBLIC SPEAKING	_____	_____
17. QUALITY CUSTOMER SERVICE	_____	_____
18. SUBSTANCE & ALCOHOL ABUSE	_____	_____
19. SUCCESSFULLY MANAGING PEOPLE	_____	_____
20. SUPERVISORY MANAGEMENT	_____	_____
21. TIME MANAGEMENT	_____	_____
22. VIOLENCE IN THE WORKPLACE	_____	_____
23. OTHER: (Please specify):	_____	_____
_____	_____	_____
_____	_____	_____
24. CHANGE MANAGEMENT	_____	_____

VI. TRAINING NEEDS BY POSITION TITLE

Please indicate specific training needs of Position Titles, e.g., Administrative Services Officer: Training in Procurement Regulations and Basic Bookkeeping in the Government.

If additional space is required, attach additional pages to this form.

POSITION TITLE: _____

General Training Needs: _____

Training Needs(s) Specific to Military Buildup: _____

POSITION TITLE: _____

General Training Needs: _____

Training Needs(s) Specific to Military Buildup: _____

POSITION TITLE: _____

General Training Needs: _____

Training Needs(s) Specific to Military Buildup: _____

POSITION TITLE: _____

General Training Needs: _____

Training Needs(s) Specific to Military Buildup: _____

POSITION TITLE: _____

General Training Needs: _____

Training Needs(s) Specific to Military Buildup: _____

VII. EMPLOYEE EXPERTISE ASSESSMENT

Is/are there employee(s) in your Department/Agency who possess the expertise to provide the training in the field/ subject listed as a Training Need in Item IV of this assessment, or any other area that you think is valuable to share with other government employees? If so, please complete the following:

NAME OF EMPLOYEE / POSITION TITLE: _____
CONTACT NO.: _____ EMAIL ADDRESS: _____
AREA OF EXPERTISE: _____
QUALIFICATIONS: _____

Do you think this area/field is related to prepare for the military buildup? Yes No

NAME OF EMPLOYEE / POSITION TITLE: _____
CONTACT NO.: _____ EMAIL ADDRESS: _____
AREA OF EXPERTISE: _____
QUALIFICATIONS: _____

Do you think this area/field is related to prepare for the military buildup? Yes No

NAME OF EMPLOYEE / POSITION TITLE: _____
CONTACT NO.: _____ EMAIL ADDRESS: _____
AREA OF EXPERTISE: _____
QUALIFICATIONS: _____

Do you think this area/field is related to prepare for the military buildup? Yes No

VIII. SUBMISSION & ACKNOWLEDGEMENT

NAME OF DEPARTMENT/AGENCY HEAD: _____
PRINT

SIGNATURE OF DEPT/AGENCY HEAD & DATE: _____
SIGNATURE & DATE

THANK YOU FOR YOUR TIME & COOPERATION!

SHOULD YOU HAVE ANY QUESTIONS, PLEASE CONTACT OUR TRAINING & DEVELOPMENT BRANCH.