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FDA FACILITIES

Planning Efforts for White Oak Campus Should Further Incorporate Leading Practices to Address Ongoing Challenges

Why GAO Did This Study

In 1990, Congress mandated that FDA consolidate its facilities in the national capital area. Consolidation began in 2003. Currently, about 10,500 FDA staff and contractors work in about 3.8 million square feet at the federally owned White Oak campus, which is managed by GSA. In 2016, FDA proposed locating an additional 5,900 staff at White Oak by 2020. FDA is in the process of updating the master plan for the White Oak campus.

GAO was asked to examine the status of the White Oak campus. This report examines (1) the benefits and challenges FDA experienced at the White Oak campus; and (2) FDA's plans for the future of the White Oak campus. GAO reviewed planning documents, cost data, Interagency Security Committee standards, and FDA's White Oak facility risk assessment; interviewed FDA and GSA officials; conducted semi-structured group interviews with randomly selected White Oak staff; and assessed FDA's planning in light of leading practices for strategic facilities planning and consolidation.

What GAO Recommends

GAO recommends that FDA, in consultation with GSA, (1) implement a vehicle separation system as called for in the 2014 risk assessment; (2) establish strategic linkage between its strategic priorities and its facilities plans; and (3) develop a strategy for collecting and analyzing needed data to inform proposed facilities planning efforts.

HHS and GSA concurred with GAO's findings, and HHS concurred with GAO's recommendations.

View [GAO-17-87](#). For more information, contact Elizabeth H. Curda at (202) 512-7114 or curdae@gao.gov or David J. Wise at (202) 512-2834 or WiseD@gao.gov.

What GAO Found

Officials from the Food and Drug Administration (FDA), within the Department of Health and Human Services (HHS) described various benefits and challenges related to the consolidation of about 10,500 FDA staff and contractors at a campus in White Oak, Maryland. As of 2016, the campus was partially complete, with 9 of the 10 planned office buildings constructed and 27 percent more staff than the 8,297 staff planned for in the completed buildings. Benefits of the consolidation cited by FDA officials included increased collaboration and improvements in efficiency from factors such as co-located staff and shared labs. FDA has also faced various challenges related to managing staff growth at White Oak within the existing campus infrastructure, such as providing sufficient office space and parking for staff. FDA's White Oak campus was designated as a high-risk facility in a 2014 risk assessment, according to Interagency Security Committee standards. However, in part, due to concerns about managing traffic and parking, FDA has faced challenges implementing the required vehicle separation system and controlling visitor access to parking, which was identified in the 2014 risk assessment. In the absence of these recommended security features, FDA is not in compliance with guidance and may put the campus at risk. According to FDA officials, FDA plans to institute a vehicle separation system, controlling visitor access to parking, in the near future. However, to-date, FDA has not documented plans for its vehicle separation system.

FDA has taken steps to plan for the future of the White Oak campus, but its planning efforts lack some elements of leading practices for facilities planning. FDA published a 5-year facilities plan in 2015—its existing plan—and, in consultation with the General Services Administration (GSA), recently developed scopes of work for proposed planning efforts related to White Oak. In these existing and proposed plans, FDA did not create or call for explicit linkages between its facilities' needs and the agency's broader strategic priorities, as recommended by leading practices, and instead relied on general linkages to agency mission. For example, in its existing plan, FDA did not describe how proposed solutions to space needs would help accomplish FDA's strategic goals and objectives, such as enhancing productivity and capabilities. According to FDA officials, strategic linkages were implicit in the agency's facilities planning process. Proposed planning efforts incorporate some leading practices, such as calling for a facility condition assessment, which may help identify gaps between current conditions and needs, and an evaluation of alternatives. On the other hand, inconsistent with leading practices, FDA lacks key information needed to inform these planning efforts, because it has limited data on daily operations—such as daily campus population and parking usage—or on benefits and challenges of the consolidation. FDA's proposed planning efforts call for improved data, but lack a detailed strategy for collecting and analyzing key information in these areas. Without strategic linkages between strategic priorities and plans and more comprehensive data, there is limited assurance that recommendations developed in proposed planning efforts for the future of the White Oak campus will represent the full scope of facility needs, and successfully identify the strengths and weaknesses of different development alternatives in order to guide decisions, and reflect agency priorities.