Supporting Statement Outline – Sample

**NOTE: Complete Part A for all ICR Requests**

SUPPORTING STATEMENT – PART A

A.  JUSTIFICATION

1.  Need for the Information Collection

In accordance with DoD Planning Guidance FY 1997-2001; ASD(HA) Memorandum, 31 Mar 1995, Medical Program Guidance; ASD(HA) DoD Corporate Information Management Strategic Plan and Enterprise Integration Implementing Strategy; the ASD(HA) Medical Readiness Strategic Plan 2001, 20 Mar 1995; 10 U.S.C; 5 U.S.C. 301, Departmental regulations; E.O. 12656, Assignment of Emergency Preparedness Responsibilities; DoD-I 1322.24, Military Medical Readiness Skills Training; DoD 6010.13-M, Medical Expense Performance Reporting System (MEPRS) for Fixed, Medical/Dental Treatment Facilities; DoD 5136.1-P, Medical Readiness Strategic Plan (MRSP); DoD 6000.12, Health Services Operations and Readiness; E.O. 9397 (SSN); HEHS-00-10 Defense Health Care: Tri-Service Strategy Needed to Justify Medical Resources, the DoD is required to provide and account for personnel, medical training and readiness and to establish a Joint strategy to justify Medical Resources for Readiness and Peacetime Care. In response, the Assistant Secretary of Defense, HA/TMA and the Service Surgeon Generals of the Army, Navy and Air Force approved development of a single Joint electronic database to provide visibility of and to support the preparedness of all Military Healthcare System (MHS) medical personnel (to meet national security emergencies).

2.  Use of the Information

The Defense Medical Personnel Preparedness Database (A.K.A. Defense Medical Human Resources System - internet - DMHRSi) is a Department of Defense application that provides the MHS with a joint comprehensive enterprise human resource system with capabilities to manage human capital across the entire spectrum of medical facilities and person types – military, civilian, contractor, Reserve component and volunteer. DMHRSi not only provides visibility of all personnel working within MHS activities, it assists in the standardization/centralization of Joint medical HR information; accurate Joint data collection and reporting and standardized management and analysis. DMHRSi is deployed to all DHP funded activities and includes 170K MHS users, The system utilizes best practices in a commercial off the shelf application across five functional areas – Manpower management, Personnel management, Labor Cost Assignment, Education and Training management, and Medical Readiness. The Manpower management function provides a standard MHS information system to support efficient medical personnel distribution at the activity level to include: education, training, provider and support staff assignment, and labor utilization and cost. Additionally, DMHRSi facilitates medical manpower requirements and authorization tracking and reporting at a Joint level in peacetime and wartime. The personnel management function provides personnel visibility and accountability across the MHS as well as the ability to match personnel assets to command needs and assign individuals to work centers. This includes Defense Health Program (DHP) and non- DHP personnel including, civilians, volunteers and contractor personnel. Additionally, staffing and scheduling supports duty assignments, labor utilization, and workload acuity measurement and reporting. It standardizes and streamlines business processes on a Joint level. For Labor Cost Assignment, DMHRSi provides the ability to assign the costs of the human capital assets to the appropriate health care delivery product line, education and training efforts, or mandated readiness activities as mandated by Medical Expense Performance Reporting System (MEPRS) guidelines. This joint tool replaces three distinct Service-level MEPRS tools. The MHS has a more precise method of recording of labor hours and more accurate reporting of costs accrued and resource utilization thus, resulting in more timely and detailed data for executive information and decision making. For Education and Training, DMHRSi centralizes education and training data and resources and enables online registration and approval of courses supports MHS health care personnel education, training, and course management for individual development and maintenance of skills and command specific needs. The education and training features feeds into the Readiness requirements. For Readiness, DMHRSi supports individual personnel and unit readiness in documenting, monitoring, evaluating and reporting of ongoing person-specific and team/unit personnel training and certification to provide immediate readiness status for deployment to theater operations.

3.  Use of Information Technology

The DMHRSi application uses reoccurring electronic data feeds from other DoD and Service source systems as well as one time local data feeds from MTFs to populate information fields to the extent possible. Source systems feeds are primarily for military and government civilian personnel. No authoritative or centralized source system exists for contractors and volunteers working within MHS facilities (DMHRSi will become that system); consequently, the majority of information will be captured from the local collection methods currently employed by the MTFs. If such methods are not in place, MTFs is required to do a one-time collection for import or manually input the information directly into DMHRSi. All users have a self-service capability which allows them to update personal information on an as needed basis. Once deployed, DMHRSi will be used as the authoritative source within the MHS to provide consistent human resource data and demographics to other MHS IT systems; thus, eliminating the necessity for redundant collection activities and information re-solicitation. As a web-based joint system with horizontal and vertical visibility, it will reduce the need for “data calls” for analytics.

4.  Non-duplication

There is no duplication of data collection. As identified in paragraph 3, previously captured information will be used to the greatest extent possible. This is the first time contractor and/or volunteer personnel data is collected by the DoD for these specific purposes.

5.  Burden on Small Business

This collection of information will involve small businesses, non-profit agencies, or other small entities providing support within Military Treatment Facilities within the Military Health System. The burden directly resulting from this system is minor. Many of these businesses may already collect the information from their employees.6.  Less Frequent Collection

If information collection is not conducted, the consequence to DoD program or policy activities is an inability to accurately manage, account for, cost and train the personnel providing healthcare on a Joint basis. Less frequent collections are anticipated after the initial input. Individuals are requested to review their self-service personnel data quarterly. Individuals are required to updates their information as needed (i.e. changes in their work or home addresses, phone numbers, etc.).

7.  Paperwork Reduction Act Guidelines

There is only one (1) special circumstances that require the collection to be conducted in a manner inconsistent with the guidelines in 5 CFR 1320.5 (d) (2). If an individual has extreme turbulence in information contained on the self-service screen (i.e. home address, phone numbers, etc.), that information would need to be updated as changed.

8.  Consultation and Public Comments

a. A 60-day Federal Register Notice for this information collection published on January 29, 2015, Vol. 80 No. 19, page 4908. No public comments were received.

b. Weekly meetings are held with each respective DMHRSi Services to consult with the service functional representatives on the validity of the requirements to collect information and the frequency of the collection. In addition, DMHRSi Working Group meetings are conducted with the Air Force, Army, and Navy functional representatives and the Information Management representatives to review current requirements, federal regulations, and industry standards.

9.  Gifts or Payment

There will be no gifts or payments provided to respondents.

10.  Confidentiality

The information in DMHRSi is sometimes personal or sensitive; therefore, it contains built-in safeguards to limit access and visibility of this information. DMHRSi uses role-based security so a user sees only the information for which permission has been granted. It uses state-of-the-market 128-bit encryption security for our transactions. It is DIACAP certified having been subjected to and passed thorough security testing and evaluation by independent parties. It meets safeguards specified by the Privacy Act of 1974 in that it maintains a published Department of Defense (DoD) Privacy Impact Assessment and System of Record covering Active Duty Military, Reserve, National Guard, and government civilian employees, to include non-appropriated fund employees and foreign nationals, DoD contractors, and volunteers. DMHRSi is hosted in a secure facility managed by the Defense Information Systems Agency. A detailed Privacy Act Statement appears prior to system access. As an HR system, DMHRSi will collect and store Social Security Numbers (SSN). Although DMHRSi issues each individual a distinctive employee number, collection of SSNs is required for successful continuity of operations within DoD and interoperability with federal organizations external to DoD. As the DoD and other federal organizations migrate from the use of the SSN as a primary means of identification in accordance with executive guidelines, DMHRSi will reduce usage. Protection of personally identifiable information (PII) is required by federal statues and policy and DoD guidelines and regulations. Future capabilities include an even greater reduction in access and full encryption of PII.

EDHA 11 is the applicable System of Records Notice (SORN) for the Defense Medical human Resources System internet (DMHRSi). The link to the SORN is provided below.

<http://dpcld.defense.gov/Privacy/SORNsIndex/DODwideSORNArticleView/tabid/6797/Article/570676/edha-11.aspx>

11.  Sensitive Questions

DMHRSi will not collect information based on questions of a sensitive nature such as sexual behavior, religious beliefs and other matters that are commonly considered private.

12.  Respondent Burden, and its Labor Costs

a.  Estimation of Respondent Burden

The majority of information is fed from existing source systems or collected for initial input. The sustainment or annual burden is directly dependent upon “as needed” changes to information contained on the self-service screen, although the local HR Specialist may request the information to be reviewed on a periodic basis. The population of self service users is 85,000. Using the requirement for a minimum of a quarterly review as a baseline, we estimate that an individual may need to update some aspect of their information an average of once every other year. Using an average of 7.5 minutes to review and update the information; the total annual hour burden for the respondents is 10,625 hours.

85,000 Respondents X 7.5 minutes to complete = 637,500 /60 = 10,625 Total Annual Hours Burden

b.  Labor Cost of Respondent Burden

As stated above, the majority of information is fed from existing source systems or collected at the site for initial input. From that point on, it is dependent upon the as needed changes. The labor category that would request a review of information would be requested by the local HR Specialist, or the HR Specialist may conduct the review of information in lieu of the self-service user. According to the Bureau of Labor Statistics data as of May 2014; the median hourly labor rate for an HR Specialist is $27.60.

85,000 Respondents X 7.5 minutes to complete = 637,500 /60 = 10,625 Total Annual Hours.

10,625 Total Annual Hours Burden \* $27.60 = $293,250.00 Total Annual Cost Burden

13.  Respondent Costs Other Than Burden Hour Costs

There is no additional cost to Respondents other than burden hour costs.

14.  Cost to the Federal Government

Annualize the costs incurred by the Federal Government in collecting and processing the information collected, and explain the methods used in determining these estimates.  Include such elements as quantification of hours, operational expenses; i.e., equipment, overhead, printing, support staff, postage, contracting out for services, etc., and any other expense that would not have been incurred without this information collection.  These costs, along with those estimated in items 12 and 13, may be aggregated in a single table.

The initial development and focus of the DMHRSi program was for the capture of MHS personnel. Consequently, the development costs for the capture of information for non-DOD personnel information was minimal as a separate item. The collection of information costs for non-DOD civilian personnel is limited to the cost of importing the service provide data into the DMHRSi application via the automated import tool. The estimated cost average for the necessary labor and resources is $15000 per site. With a total of 178 collection sites, the start-up cost to the government is approximately $2.67 million. The total operation and maintenance costs for non-DOD personnel are indistinguishable from the overall annual maintenance cost for the project. DMHRSi will serve as the authoritative source and disseminate human resource demographic information to downstream systems. Since non-DOD personnel are only outlined as a different person type, none of the existing requirements require isolation of their information. Therefore, the estimate of annual cost for maintenance for non-DOD personnel is conservatively not greater than 20% of the budget. That cost is approximately $2 million annually to POM Year 2010 and includes enterprise software licensing, and account maintenance. Additionally, annual collection of this information would be relegated to “as needed” electronic updates by any of the proposed 80,000 users. Users cover the spectrum of MHS personnel and a wide salary range. The annual costs of maintaining this information in DMHRSi should not exceed the current annual cost of either maintaining this information manually or effort spent during “data calls”. The costs for updating and additional personnel is equivalent to costs outlined in OMB 83-I, section 13.

15.  Reasons for Change in Burden

There is no change in burden.

16.  Publication of Results

Information gathered through this collection will not be published but will be used for operational purposes, e.g., to optimize the human resource system with capabilities to manage personnel, manpower, education & training, labor cost assignment and readiness functional areas.

17.  Non-Display of OMB Expiration Date

DoD is not seeking an exception to displaying the expiration date of this information collection.

18.  Exceptions to "Certification for Paperwork Reduction Submissions"

There are no exceptions to the certification statement in Item 19 of OMB Form 83-I