Form Approved  
OMB No. XXXX-XXXX  
Exp. Date XX/XX/20XX

**Draft Workforce Safety Supplemental Item Set**

**Hospital Point of Contact (POC) Instructions**

**8/3/2020**

Public reporting burden for this collection of information is estimated to average 3 minutes per response, the estimated time required to complete the survey. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-XXXX) AHRQ, 540 Gaither Road, Room # 5036, Rockville, MD 20850.

**SOPS® Hospital Survey with Workforce Safety Supplemental Items**

**Survey Procedures for Hospital Points of Contact (POC)**

Westat will electronically provide you with promotional flyers and a draft letter of support that you will customize and have signed by your leadership. Please notify [insert Westat staff} If someone on your provider and staff list no longer works in your hospital.

**WHAT YOU NEED TO DO NOW**

|  |  |
| --- | --- |
| **Target Dates** | **Activities** |
| **Upon receipt** | * Disseminate promotional flyers to eligible providers and staff on your sample list. |
|  | * Beta test the web survey URL link in your hospital to ensure that web survey is accessible. |
| **NEXT STEPS** | |
| **Target Dates** | **Activities** |
| **Beginning of**  **Week 1: Start of Survey Data Collection** | * Westat will distribute letters of support from your leadership to all eligible provider and staff members that are listed on your staff list. * A few days later, Westat will send the web survey invitation email to all eligible providers and staff members. |
| **Week 2** | * Westat will send email thank you/reminders with a web survey invitation to eligible providers and staff members that did not complete the survey. |
| **Week 3** | * Westat will send 2nd email thank you/reminders with a web survey invitation to eligible providers and staff members that did not complete the survey. |
| **Week 5** | * Westat will send the **final** email thank you/reminders with a web survey invitation to eligible providers and staff members that did not complete the survey. |

Thank you for your support in promoting staff participation, as it is crucial to getting results that accurately represent your hospital and getting 100% response! Contact [insert Westat staff], Study Manager at [Workforce](mailto:Workforce)Safety@westat.com or 1-855-390-2448 if you have questions.