SUPPORTING STATEMENT - PART A

SCORE™ Culture and Engagement Survey – 0720-SCOR

1.   Need for the Information Collection

The SCORE™ Culture and Engagement Survey (Safety, Communication, Operational Risk, Resiliency/Burnout, and Engagement) is a validated, evidence-based, and outcomes-predictive assessment tool for culture and engagement. With SCORE™ the Defense Health Agency (DHA) Defense Health Network National Capital Region (DHN NCR) can measure, analyze, and respond to current culture, system, and engagement indicators to get a clear picture of our organizational dynamics down to the local level. The SCORE™ survey is designed to provide insights that are not only diagnostic, but actionable. Debriefing results —with visible follow through and specific actions—not only drives improvement, but also enhances trust and supports organizational learning. Survey results provide opportunities in both clinical and non-clinical work settings to proactively discuss what it feels like to work in those settings. DHN NCR leaders can use the results to frame conversations about issues such as teamwork, safety, learning, and the quality of leadership.

The SCORE™ survey is a tool for organizations to assess and understand their workplace culture and assess principles of Ready Reliable Care (RRC). It collects information from employees about various aspects of the military medical treatment facility (MTF) culture, including values, beliefs, attitudes, and behaviors. The survey helps MTFs identify their cultural strengths and areas that require improvement. By collecting feedback from employees, MTFs can gain insights into what is working well and what needs attention. This information enables them to make data-driven decisions to enhance their culture and create a more safe and reliable work environment. The survey helps assess the alignment between an organization's culture and its strategic goals. It provides insights into whether employees perceive the organization's values and behaviors as consistent with its stated objectives. With the SCORE™ survey data, organizations can identify any gaps and take corrective actions to ensure better alignment. The survey data can be used for benchmarking and comparison purposes. Organizations can compare their culture metrics against industry standards or other high-performing companies.

Survey results are used to:

- Identify areas for improvement,
- Develop actionable strategies,
- Engage employees in the improvement process,
- Implement continuous feedback and promote Safety Leader Rounding,
- Integrate RRC principles in training and development, and
- Communicate progress and celebrate success.

The SCORE™ survey results are a valuable resource for DHN NCR MTFs to improve and promote RRC principles. By identifying areas for improvement, developing actionable strategies, engaging employees, implementing continuous feedback loops, recognizing RRC behaviors, integrating RRC principles into training, and communicating progress, MTFs can enhance their culture and embed RRC principles into their everyday operations.

The 2001 National Defense Authorization Act (NDAA) Section 754 addresses patient safety in military and Veteran's health care systems. The legislation states that the Secretary of Defense (SECDEF) shall establish a patient care error reporting and management system to study occurrences of errors in patient care and that one of the purposes of the system should be "to identify systemic factors that are associated with such occurrences" and "to provide for action to be taken to correct the identified systemic factors." In addition, the legislation states that the SECDEF shall "continue research and development investments to improve communication, coordination, and teamwork in the provision of health care."

2.   Use of the Information

The respondents of the SCORE™ survey are all staff members (Active Duty Service Members, civilians, contractor personnel, and volunteers) working within the DHN NCR MTFs. There are approximately 11,400 personnel eligible for the survey. The last iteration of the survey had a response rate of 60%, with 6,873 respondents: 3,224 active duty, 2,741 DoD civilians, 737 contractors, 171 volunteers/unidentified.

The SCORE™ survey was conducted in 2024 for NCR MTFs to collect data to report for the Leapfrog Hospital Safety Grade. In 2024, to maximize Leapfrog scores related to patient safety culture, MTFs must have administered a validated patient safety culture survey within the prior two years. Since 2005 the DHHQ Patient Safety Program has administered the DHA Patient Safety Culture Survey (the Agency for Healthcare Research and Quality instruments) approximately every three years and therefore did not meet Leapfrog's two-year periodicity requirement for the 2024 Leapfrog Hospital Safety Grade. Moving forward, the DHA Patient Safety Culture Survey will be administered DHA-wide every two years, and it will be used as the official and sole reporting tool for Leapfrog.

Respondents will be provided a survey link by email. Respondents can also access the survey using a QR code. When using a link, the survey administrator provides respondents with a URL that leads them directly to the survey. Respondents can access the survey by clicking on the provided link, which directs them to a web page specifically designed for the survey. Once on the survey page, respondents are presented with clear instructions and a series of questions to answer. Alternatively, respondents may choose to access the survey using a QR code. In this case, the survey administrator provides a QR code that respondents

can scan using a QR code scanner application installed on their smartphone or mobile device. After scanning the QR code, respondents are redirected to the web page where they can start the survey. After completing the survey, respondents will click "submit" to complete and return their responses.

MTF leaders will send out pre-notification emails introducing the SCORE™ survey. The emails provide relevant details, such as the purpose of the survey, its importance, and the expected time commitment. MTF leaders will send out an email invitation to their staff members that includes the link to the survey and a QR code. Printed communication in the form of posters and flyers is also used to communicate the survey's importance. MTF leaders may choose to print the QR code on the flyers to allow respondents to take the survey on their mobile device.

A survey response is completed and submitted through the survey website and is processed by the survey administrator, Vizient Safe and Reliable Healthcare. Data is processed and completed using the SCORE™ Survey Manager. The survey vendor has been used for previous iterations of the survey. No personally identifiable information is collected, and all responses will remain anonymous.

3.   Use of Information Technology

100% of responses are collected electronically.

4.   Non-duplication

The information obtained through this collection is unique and is not already available for use or adaptation from another cleared source.

5.   Burden on Small Businesses

This information collection does not impose a significant economic impact on a substantial number of small businesses or entities.

6.   Less Frequent Collection

The 2024 iteration of the SCORE™ survey will be the last iteration that is allowed by DHA for submission of Leapfrog reporting requirements.

7.   Paperwork Reduction Act Guidelines

This collection of information does not require collection to be conducted in a manner inconsistent with the guidelines delineated in 5 CFR 1320.5(d)(2).

8.   Consultation and Public Comments

Part A: PUBLIC NOTICE

A 60-Day Federal Register Notice (FRN) for the collection published on Monday, May 20, 2024. The 60-Day FRN citation is 88 FRN 43836.

No comments were received during the 60-Day Comment Period.

A 30-Day Federal Register Notice for the collection published on Monday, December 16, 2024. The 30-Day FRN citation is 89 FRN 101575

Part B: CONSULTATION

No additional consultation apart from soliciting public comments through the Federal Register was conducted for this submission.

9.   Gifts or Payment

No payments or gifts are being offered to respondents as an incentive to participate in the collection.

10.   Confidentiality

A Privacy Act Statement is not required for this collection because we are not requesting individuals to furnish personal information for a system of records.

A System of Record Notice (SORN) is not required for this collection because records are not retrievable by PII.

A Privacy Impact Assessment (PIA) is not required for this collection because PII is not being collected electronically.

As applicable, records will be maintained in accordance with the following records disposition schedules:

FILE NUMBER: 905-02
FILE TITLE: Quality Assurance Studies and Analyses of Healthcare Quality Standards
FILE DESCRIPTION: Files pertaining to the quality assurance analysis of DoD, other federal agency, State and local, and other healthcare standards including studies and analyses that result in issuance of new standards.
DISPOSITION: Permanent. Cut off upon completion of standard. Transfer to NARA 25 years after cutoff.
AUTHORITY: NC1-330-77-005, item 905-02a and 905-02c

FILE NUMBER: 905-03
FILE TITLE: Ad Hoc Quality Assurance Studies and Analyses of Healthcare Quality
FILE DESCRIPTION: Studies and evaluations on a "when required" basis, not resulting in issuance of new standards.
DISPOSITION: Temporary. Cut off upon completion of study. Destroy 5 years after cutoff.
AUTHORITY: NC1-330-77-005, item 905-02b

11.   Sensitive Questions

No questions considered sensitive are being asked in this collection.

12.   Respondent Burden and its Labor Costs

Part A: ESTIMATION OF RESPONDENT BURDEN

1) Collection Instrument(s)
   SCORE™ Culture and Engagement Survey
      a) Number of Respondents: 6,873
      b) Number of Responses Per Respondent: 1
      c) Number of Total Annual Responses: 6,873
      d) Response Time: 15 minutes
      e) Respondent Burden Hours: 1,718

2) Total Submission Burden
      a) Total Number of Respondents: 6,873
      b) Total Number of Annual Responses: 6,873
      c) Total Respondent Burden Hours: 1,718

Part B: LABOR COST OF RESPONDENT BURDEN

1) Collection Instrument(s)
   SCORE™ Culture and Engagement Survey
      a) Number of Total Annual Responses: 6,873
      b) Response Time: 15 minutes
      c) Respondent Hourly Wage: $49.07
      d) Labor Burden per Response: $12.27
      e) Total Labor Burden: $84,315

2) Overall Labor Burden
      a) Total Number of Annual Responses: 6,873
      b) Total Labor Burden: $84,315

The Respondent hourly wage was determined by using May 2023 U.S. Bureau of Labor Statistics Wage Data for <u>Healthcare Practitioners and Technical Occupations</u> (https://www.bls.gov/oes/current/oes_nat.htm#00-0000).

13.   <u>Respondent Costs Other Than Burden Hour Costs</u>

There are no annualized costs to respondents other than the labor burden costs addressed in Section 12 of this document to complete this collection.

14.   <u>Cost to the Federal Government</u>

Part A: LABOR COST TO THE FEDERAL GOVERNMENT

1) Collection Instrument(s)
   SCORE™ Culture and Engagement Survey
      a) Number of Total Annual Responses: 6,873
      b) Processing Time per Response: 0 hours
      c) Hourly Wage of Worker(s) Processing Responses: $0
      d) Cost to Process Each Response: $0
      e) Total Cost to Process Responses: $0

2) Overall Labor Burden to the Federal Government
      a) Total Number of Annual Responses: 6,873
      b) Total Labor Burden: $0

Labor cost to the government calculated based on government oversight of the contract conducting this survey as $10,365.

Part B: OPERATIONAL AND MAINTENANCE COSTS

1) Cost Categories
      a) Equipment: $0
      b) Printing: $0
      c) Postage: $0
      d) Software Purchases: $0
      e) Licensing Costs: $
      f) Other: The contract cost for conducting this survey is $327,250

2) Total Operational and Maintenance Cost: $327,250

Part C: TOTAL COST TO THE FEDERAL GOVERNMENT

1) Total Labor Cost to the Federal Government: $10,365

2) Total Operational and Maintenance Costs: $327,250

3) Total Cost to the Federal Government: $337,615

15.   Reasons for Change in Burden

This is a new collection with a new associated burden.

16.   Publication of Results

At this time there is not a plan to publish results. However, the results may be published in the future.

17.   Non-Display of OMB Expiration Date
We are not seeking approval to omit the display of the expiration date of the OMB approval on the collection instrument.

18.   Exceptions to "Certification for Paperwork Reduction Submissions"

We are not requesting any exemptions to the provisions stated in 5 CFR 1320.9.