



AGENCY DISCLOSURE NOTICE

**SCORE: Assessment of Your Work Setting
Safety, Communication, Operational Risk,
Resiliency/Burnout, and Engagement**

The public reporting burden for this collection of information, 0720-SCOR is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

Please answer the following items with respect to your specific unit or clinical area. Choose your responses using the scale below:

A	B	C	D	E	X
Disagree Strongly	Disagree Slightly	Neutral	Agree Slightly	Agree Strongly	Not Applicable
Improvement Readiness					
The learning environment in this work setting utilizes input/suggestions from the people who work here.					
A	B	C	D	E	X
The learning environment in this work setting integrates lessons learned from other work settings.					
A	B	C	D	E	X
The learning environment in this work setting effectively fixes defects to improve the quality of what we do.					
A	B	C	D	E	X
The learning environment in this work setting allows us to gain important insights into what we do well.					
A	B	C	D	E	X
The learning environment in this work setting allows us to pause and reflect on what we do well.					
A	B	C	D	E	X
The learning environment in this work setting is protected by our local management (or physician leaders).					
A	B	C	D	E	X
Local Leadership					
In this work setting local management is available at predictable times.					
A	B	C	D	E	X
In this work setting local management regularly makes time to provide positive feedback to me about how I am doing.					
A	B	C	D	E	X
In this work setting local management regularly makes time to pause and reflect with me about my work.					
A	B	C	D	E	X
In this work setting local management provides frequent feedback about my performance.					
A	B	C	D	E	X
In this work setting local management provides useful feedback about my performance.					
A	B	C	D	E	X
In this work setting local management provides meaningful feedback to people about their performance.					
A	B	C	D	E	X
In this work setting local management communicates their expectations to me about my performance.					
A	B	C	D	E	X
Burnout Climate and Personal Burnout					
Events in this work setting affect the lives of people here in an emotionally unhealthy way.					
A	B	C	D	E	X
People in this work setting are burned out from their work.					
A	B	C	D	E	X
People in this work setting are exhausted from their work.					
A	B	C	D	E	X
People in this work setting are frustrated by their jobs.					
A	B	C	D	E	X
People in this work setting are working too hard on their jobs.					
A	B	C	D	E	X
Events in this work setting affect my life in an emotionally unhealthy way.					
A	B	C	D	E	X
I feel burned out from my work.					
A	B	C	D	E	X
I feel fatigued when I get up in the morning and have to face another day on the job.					
A	B	C	D	E	X
I feel frustrated by my job.					
A	B	C	D	E	X
I feel I am working too hard on my job.					
A	B	C	D	E	X
Teamwork Climate					
Disagreements in this work setting are appropriately resolved (i.e. not who is right but what is right for the patient).					
A	B	C	D	E	X
In this work setting, it is difficult to speak up if I perceive a problem with patient care.					
A	B	C	D	E	X
It is easy for personnel here to ask questions when there is something that they do not understand.					
A	B	C	D	E	X
The people here from different disciplines/backgrounds work together as a well-coordinated team.					
A	B	C	D	E	X
Dealing with difficult colleagues is consistently a challenging part of my job.					
A	B	C	D	E	X
Communication breakdowns are common in this work setting.					
A	B	C	D	E	X
Communication breakdowns are common when this work setting interacts with other work settings.					
A	B	C	D	E	X
Safety Climate					
My suggestions about quality would be acted upon if I expressed them to management.					
A	B	C	D	E	X
Errors are handled appropriately in this work setting.					
A	B	C	D	E	X
I receive appropriate feedback about my performance.					
A	B	C	D	E	X
The culture in this work setting makes it easy to learn from the errors of others.					
A	B	C	D	E	X
I would feel safe being treated here as a patient.					
A	B	C	D	E	X
In this work setting, it is difficult to discuss errors.					
A	B	C	D	E	X
The values of facility leadership are the same values that people in this work setting think are important.					
A	B	C	D	E	X

During the past work week, how often did the following occur?

A	B	C	D	X
Rarely or none of the time (less than 1 day)	Some or a little of the time (1-2 days)	Occasionally or a moderate amount of time (3-4 days)	All of the time (5-7 days)	Not Applicable
Skipped a meal	A B C D X			
Ate a poorly balanced meal	A B C D X			
Worked through a day/shift without any breaks	A B C D X			
Arrived home late from work	A B C D X			

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A	B	C	D	E	X
Disagree Strongly	Disagree Slightly	Neutral	Agree Slightly	Agree Strongly	Not Applicable

With respect to the <u>growth opportunities</u> in this work setting I have....					
enough variety in my work.	A	B	C	D	E X
opportunities for personal growth/development.	A	B	C	D	E X
the feeling that I can achieve something.	A	B	C	D	E X
opportunities for independent thought and action.	A	B	C	D	E X
freedom in carrying out work activities.	A	B	C	D	E X
influence in the planning of work activities.	A	B	C	D	E X
influence in decisions about work activity timelines.	A	B	C	D	E X

With respect to <u>job-related uncertainty about the future</u> in this work setting, I feel certain that...					
I will still be working in one year's time.	A	B	C	D	E X
I will keep my current job in the next year.	A	B	C	D	E X
Next year I will keep the same function level as currently.	A	B	C	D	E X

With respect to <u>advancement</u> in this organization:					
I can live comfortably on my pay.	A	B	C	D	E X
This organization pays good salaries.	A	B	C	D	E X
I am paid enough for the work I do.	A	B	C	D	E X
I have opportunities to progress financially.	A	B	C	D	E X
I have opportunities to advance through training courses.	A	B	C	D	E X
I have opportunities to be promoted.	A	B	C	D	E X
I am satisfied with my total benefits package.	A	B	C	D	E X

With respect to the <u>workload</u> in this work setting I have....					
too much work to do.	A	B	C	D	E X
to work under time pressure.	A	B	C	D	E X
to attend to many things at the same time.	A	B	C	D	E X
to give continuous attention to work.	A	B	C	D	E X
to remember many things.	A	B	C	D	E X
to deal with things that affect me personally.	A	B	C	D	E X
contact with difficult people.	A	B	C	D	E X

With respect to <u>my intentions to leave</u> this organization:					
I would like to find a better job.	A	B	C	D	E X
I often think about leaving this job.	A	B	C	D	E X
I have plans to leave this job within the next year.	A	B	C	D	E X

With respect to the <u>participation in decision making</u> that I experience here:					
The decision making process is clear to me.	A	B	C	D	E X
It is clear to whom I should address specific problems.	A	B	C	D	E X
I can discuss work problems with my direct supervisor.	A	B	C	D	E X
I can participate in decisions about the nature of my work.	A	B	C	D	E X
I have a direct influence on my organization's decisions.	A	B	C	D	E X
This organization utilizes input from staff about technology initiatives.	A	B	C	D	E X

Emotional Thriving					
I have a chance to use my strengths every day at work.	A	B	C	D	E X
I feel like I am thriving at my job.	A	B	C	D	E X
I feel like I am making a meaningful difference at my job.	A	B	C	D	E X
I often have something that I am looking very forward to at my job.	A	B	C	D	E X

Emotional Recovery					
I always recover quickly after difficulties.	A	B	C	D	E X
I can adapt to events in my life that I can not influence.	A	B	C	D	E X
My mood reliably recovers after frustrations and setbacks.	A	B	C	D	E X
I can always regain a positive outlook despite what happens.	A	B	C	D	E X

Workforce Safety						
I feel safety is a priority at my company.	A	B	C	D	E	X
I am aware of my building's emergency evacuation plan.	A	B	C	D	E	X
I have had up to date training on how to handle emergency situations at work.	A	B	C	D	E	X
I know the location of my building's fire extinguisher.	A	B	C	D	E	X
I feel up to date on my knowledge of possible safety hazards in my workplace.	A	B	C	D	E	X
I am made aware of safety violations as they affect me and my job.	A	B	C	D	E	X
I am regularly reminded to practice safe work habits by my managers.	A	B	C	D	E	X
I am aware of safety laws and regulations surrounding my line of work.	A	B	C	D	E	X
DEI/Belonging						
I feel I belong and am welcomed, as a person, at this job.	A	B	C	D	E	X
My employer has a strong commitment to diversity, equity, and inclusion.	A	B	C	D	E	X
Facility leaders interact with the workers to understand what we do.	A	B	C	D	E	X
My ideas and opinions about patient care are valued by others.	A	B	C	D	E	X
I feel respected by those in leadership.	A	B	C	D	E	X

Additional Questions:

Does your work setting use Safety Leadership Rounds (SLR) to discuss with senior leaders any issues that could harm patients, reduce reliability, or undermine the safe delivery of care? **Yes No Not Sure**

Note: Safety Leadership Rounds are defined as an event in which senior leaders visit clinical and non-clinical areas and speak with staff about quality, safety, areas of potential risk, policy compliance, and workplace stressors. **Yes No Not Sure**

Do your executive leaders (MTF Directors and Senior Leaders) conduct Safety Leadership Rounds (SLR)? **Yes No Not Sure**

Have you had the opportunity to participate in SLR in the past 12 months? **Yes No Not Sure**

Do you receive feedback about patient safety risks that were reduced as a result of Safety Leadership Rounds (SLR)? **Yes No Not Sure**

How effective are your daily Unit-Based Huddles (UBH)? **Very Effective Effective Neither Effective nor Ineffective Ineffective Very Ineffective**

N/A - I do not participate in daily unit-based huddles

Background Information

Have you completed this survey before (circle one)? **Yes No Not Sure**

Shift: **Day Night Swing Other** Shift Length: **8hrs 10hrs 12hrs Flex Other**

Position: (mark only one)

- | | | |
|--|--|---|
| <input type="radio"/> Attending/Staff Physician | <input type="radio"/> Pharmacist | <input type="radio"/> Technologist (e.g. Surg, Lab, Rad.) |
| <input type="radio"/> Fellow Physician | <input type="radio"/> Therapist (RT, PT, OT, Speech) | <input type="radio"/> Administrator / Manager |
| <input type="radio"/> Resident Physician | <input type="radio"/> Clinical Social Worker | <input type="radio"/> Environmental Support (Housekeeper) |
| <input type="radio"/> Physician Assistant | <input type="radio"/> Dietician/Nutritionist | <input type="radio"/> Other Manager (e.g., Clinic Manager/Supervisor) |
| <input type="radio"/> Nurse Practitioner | <input type="radio"/> Clinical Support (CMA, EMT, Nurses Aide, etc.) | <input type="radio"/> Admin Support (Clerk/Secretary/Receptionist) |
| <input type="radio"/> Nurse Manager/Charge Nurse | <input type="radio"/> Technician (e.g., PCT, Surg., Lab, EKG, Rad.) | <input type="radio"/> Other: _____ |
| <input type="radio"/> Registered Nurse | | |

Years in Specialty: **Less than 6 months 6 to 11 mos. 1 to 2 years 3 to 4 years 5 to 10 years 11 to 20 years 21 years or more**

Years at Institution: **Less than 6 months 6 to 11 mos. 1 to 2 years 3 to 4 years 5 to 10 years 11 to 20 years 21 years or more**