NAVAL SPECIAL WARFARE COMMAND

Optimizing Performance; Human Factors Program in Naval Special Warfare

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Force Psychologist
Naval Special Warfare

The overall classification of this briefing is:
UNCLASSIFIED
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Performance Focused

- Human Factors Programs are Leader-Led
- Not Psychology initiative
### Hospital vs Embedded vs Operational Psychology

<table>
<thead>
<tr>
<th></th>
<th>MTF</th>
<th>EMH</th>
<th>Operational Psychology</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SETTING</strong></td>
<td>Hospital</td>
<td>Operational unit</td>
<td>Operational unit</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Medical / Special Staff</td>
<td>Special Staff</td>
</tr>
<tr>
<td><strong>GOALS</strong></td>
<td>Medical</td>
<td>Mission</td>
<td>Direct mission</td>
</tr>
<tr>
<td></td>
<td>Absence of disease</td>
<td>Optimize performance</td>
<td>support</td>
</tr>
<tr>
<td><strong>FOCUS</strong></td>
<td>Treatment</td>
<td>Prevention &amp; early intervention</td>
<td>Applied psychology</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Coordination</td>
<td>Assessment</td>
</tr>
<tr>
<td><strong>REFERRALS</strong></td>
<td>Primary care</td>
<td>Self</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td>Command</td>
<td>Chain of Command</td>
<td>Policy</td>
</tr>
<tr>
<td><strong>LEADERSHIP</strong></td>
<td>Medical Commander</td>
<td>Operational Commander</td>
<td>Operational Commander</td>
</tr>
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</table>
Background

- NSW HFC adapted from Aviation by a Group in 2014
- HFC identified as Best Practice from Comprehensive Review
- Most NSW Commands conduct HFCs and see it as value added
- Benefits individual, supervisor and leadership
- Problem: Not standardized, inconsistent implementation, no associated training, overly subjective, no enterprise data management solution
Comparison

<table>
<thead>
<tr>
<th>Big Navy</th>
<th>NSW</th>
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<tbody>
<tr>
<td>• Culture of Excellence</td>
<td>• HFC and HFB since 2015</td>
</tr>
<tr>
<td>• Command Resilience Team</td>
<td>• Everyone is reviewed</td>
</tr>
<tr>
<td>• Resilience Tool Kit</td>
<td>• Proactive, preventative</td>
</tr>
<tr>
<td>• CRTHFC</td>
<td>• Embraced by leadership</td>
</tr>
<tr>
<td>• SUB: No HFC, HFC-like for transient personnel</td>
<td></td>
</tr>
<tr>
<td>• NECC: No HFC</td>
<td></td>
</tr>
<tr>
<td>• MAR: Force Preservation Council</td>
<td></td>
</tr>
<tr>
<td>• SUR: New development of FPC</td>
<td></td>
</tr>
<tr>
<td>• AIR: HFC for aviators, moving toward everyone</td>
<td></td>
</tr>
<tr>
<td>• No objective measures used</td>
<td></td>
</tr>
</tbody>
</table>
HFP 2.0 LOEs

1. Standardization
   a. HF Categories List with behavioral anchors
   b. HF Discussion Form
   c. Update HFP instruction

2. Training “Art of the Discussion”
   a. Experiential in-person training

3. Objective Measure
   a. Self administered survey with established measure. Individual and aggregated feedback
   b. Develop 15 min HF Profile Survey

4. Digital Platform and Data Management
   a. Manage and track data over time to monitor trends and progress of identified issues
   b. Setting stage for AI for the human weapon system
Human Factors Process 2.0

Human Factors Survey
- Individual survey measuring global functioning
- Automatic feedback to member comparing results to self, unit and population

Human Factors Discussion
- Supervisor discusses each HF category with member
- Rates each HF category
- Develops plan to maximize performance
- Art of the discussion

Human Factors Council
- Leaders brief each member to HF Council
- Review HF Survey and HF Discussion
- Review developmental plan and category ratings
# 12 Human Factors Categories

<table>
<thead>
<tr>
<th></th>
<th><strong>Green</strong></th>
<th><strong>Yellow</strong></th>
<th><strong>Orange</strong></th>
<th><strong>Red</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Relationship</strong></td>
<td>No change, healthy and fulfilling relationships</td>
<td>Relationship change (marriage, significant other)</td>
<td>Mild relationship problems (disputed divorce, break-up restraining order, infidelity)</td>
<td>Significant relationship problems (Contentious divorce, death of spouse)</td>
</tr>
<tr>
<td><strong>Children</strong></td>
<td>No change, children doing well (school, socially, sports)</td>
<td>New child (birth, adoption, extended family)</td>
<td>Mild problems pertaining to children (childcare issues, problems escalating at school, new EFMP)</td>
<td>Significant problems with children (medical, custody fight, learning problem causing distress, loss of child)</td>
</tr>
<tr>
<td><strong>Family</strong></td>
<td>No change, extended family doing well and supportive of member</td>
<td>Change in family situation (Family member health, parents move in with member)</td>
<td>Mild familial problems (mild health, legal, financial problems)</td>
<td>Significant problems with family (Significant health, legal, or financial problems with extended family)</td>
</tr>
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Human Factors Council

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<thead>
<tr>
<th>Human Factors Council Members</th>
<th>Ad-hoc Members</th>
</tr>
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<tbody>
<tr>
<td>• Commanding Officer</td>
<td>• Warrior and Family Support</td>
</tr>
<tr>
<td>• Executive Officer</td>
<td>• Fleet and Family Support Center Representative</td>
</tr>
<tr>
<td>• Command Master Chief</td>
<td>• Financial Advisor</td>
</tr>
<tr>
<td>• Psychologist</td>
<td>• Drug and Alcohol Counselor</td>
</tr>
<tr>
<td>• Medical</td>
<td>• Suicide Prevention Coordinator</td>
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<td>• Chaplain</td>
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Human Factors Council

- Commanding Officer
- Executive Officer
- Command Master Chief
- Psychologist
- Medical
- Chaplain

Ad-hoc Members

- Warrior and Family Support
- Fleet and Family Support Center Representative
- Financial Advisor
- Drug and Alcohol Counselor
- Suicide Prevention Coordinator
JOHNSTON, SCOTT

SELF REPORT SURVEY RESULTS

RESILIENCE: 15
WORK SATISFACTION: 17
LIFE SATISFACTION: 32
UNIT COHESION: 5
SOCIAL SUPPORT: 69

PERCEIVED STRESS: 13
MORALE: 12
STRESS-O-METER: 2
BURNOUT: 20

In the last 30 days:
DAYS LOST TO STRESS/BURNOUT: 0
1/2 DAYS OR LESS LOST TO STRESS/BURNOUT: 1
TIMES SEEN BY PROFESSIONAL FOR STRESS/BURNOUT: 0

RATE/RANK: LT
AGE: 48
ACTIVE DUTY SERVICE DATE: 9/24/1993
MARITAL STATUS: MARRIED
DESIGNATION: Active Duty/FTS
PROJECTED ROTATION DATE: 12/1/2022
DEPENDENTS: 1

SURVEY ID: 2162
SURVEY TAKEN: Wednesday, April 14, 2021
INTERVIEW DATE: Tuesday, June 8, 2021

TOTAL GREEN: 8
TOTAL YELLOW: 4
TOTAL ORANGE: 0
TOTAL RED: 0
OVERALL ASSESSMENT: YELLOW

RELATIONSHIP:
Just got married, doing well
MENTAL HEALTH:
(Blank)
WORK PERFORMANCE:
Strong performer

CHILDREN:
No children
SLEEP:
Only sleeps 4-5 hours per night
RESILIENCE:
Doing well in the teams and adjusting well

FAMILY:
Father recently diagnosed with Cancer.
Lives on the East Coast
LEGAL:
(Blank)
SPIRITUALITY:
Attends church regularly

MEDICAL:
(Blank)
FINANCIAL:
Just bought a new house in IL. Lots of financial obligations
CRITICAL DATES:
(Blank)

REFERRALS:
Chaplain: Hert and Family Service Center:

PLAN:
Recommended talk with chaps to talk about father’s diagnosis. Recommend FTSC referral for financial counseling about his recent financial obligations of new house ownership and marriage.
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