

Performance Data Report

Space Medicine Division
Human Research Program
Behavioral Health & Performance Research Element

March 31, 2011

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Acronyms

CAPCOM

BHP Behavioral Health & Performance

Spacecraft Communicator

BME Biomedical Engineer

BMed Behavioral Medicine

CB Astronaut Office

CMX Crew Member Exchange

CNS Central Nervous System

EVA Extravehicular Activity

ITCB International Training Control Board

IOM Institute of Medicine

IRP Integrated Research Plan

ISS International Space Station

JSC Johnson Space Center

LMX Leader-Member Exchange

LSAH Longitudinal Study of Astronaut Health

LSDA Life Sciences Data Archive

MCC Mission Control Center

MOD Mission Operations Directorate

MRI Magnetic Resonance Imaging

PDRS Payload Development and Retrieval System

POC Point of Contact

SD Space Medicine Division

SFRM Space Flight Resource Management

SK Human Adaptation and Countermeasures Division

SLSD Space Life Sciences Directorate

SME Subject Matter Expert

TMX Team Member Exchange

Introduction

This report is the result of a collaborative effort between NASA's Behavioral Health & Performance (BHP) Research and Operations Group to investigate and determine the availability of data pertaining to behavioral performance (and other pertinent variables) that have been collected by the laboratories at NASA's Johnson Space Center (JSC).

The Behavioral Health & Performance Group at JSC has two components—operations and research—and each of these components focuses on a specific role in supporting current and future flight missions. The BHP Operations group provides direct and indirect psychological services to the International Space Station (ISS) astronauts and their families. Beginning with the Shuttle-Mir Program, services available to the crews and families have gradually expanded as experience was gained in long-duration flight. Enhancements to the overall BHP program have been shaped by crew members' personal preferences, family requests, specific events during the missions, programmatic requirements, and other lessons learned. The BHP Operations program focuses its work on two areas—operational psychology and behavioral medicine—and provides consultation in two other related areas, human-to-system interface and sleep and circadian rhythm. Within these areas of focus are psychological and psychiatric screening for astronaut selection as well as many resources that are available to the crew members, families, and other groups such as crew surgeons and various levels of management within NASA. Services include preflight, in-flight, and postflight preparation; training and support; provision of resources by the Family Support Office; in-flight monitoring; clinical care for astronauts and their families; and expertise in the workload and work/rest scheduling of crews on the ISS (Sipes & VanderArk, 2005).

The BHP Research Element is one of six elements of the Human Research Program. It is responsible for research on three of the Risks in the Human Research Roadmap, namely the Risk of Adverse Behavioral Conditions and Psychiatric Disorders (Behavioral Medicine [BMed]), the Risk of Performance Decrements due to Inadequate Cooperation, Coordination, Communication, and Psychosocial Adaptation within a Team (Team), and the Risk of Performance Errors due to Sleep Loss, Circadian De-Synchronization, Fatigue, and Work Overload (Sleep). BHP has the task of designing, implementing, and managing a research program composed of focused and applied research tasks (or projects) that develop operationally relevant deliverables and products (such as tools, technologies, protocols, and countermeasures), to mitigate the high-priority BHP health and performance risks to flight crews (and mission ground support crews) during long-duration missions and promote rapid return to terrestrial levels of functioning after such missions. Specific gaps (knowledge and technology) within each of the

BHP Risks identify areas of research that needs to be done to prevent or reduce the overall level or consequences of risk associated with long-duration missions (Table 1). Many of these areas of research require collection of astronaut data on performance and other variables in order to address the gaps. Specifically, BHP Research has a need to obtain objective measures that assess performance in space flight. In addition to personality and behavioral performance data, BHP Research also needs astronaut job and mission performance data to determine and rank the most salient personality characteristics and behaviors of the highest-performing astronauts. Concerns have been acknowledged both in the Institute of Medicine (IOM) Report (2007) and also in the Space Life Sciences Directorate's (SLSD's) Senior Management roundtable discussions. The criticism in the IOM Report on the Behavioral Medicine Evidence Report echoed this problem, stating that the Behavioral Medicine Evidence Report failed to include a "substantive review of personality and behavioral performance that would be most likely to promote effective crew performance..." (p. 9, Institute of Medicine, 2007).

Thus, BHP is challenged with obtaining such needed information by gaining access to these data or creating these data for the needs of the specific research task and the overall BHP risk reduction research strategy. To address this challenge, BHP's Operations and Research groups collaborated to systematically identify what types of performance data are needed in relevant BHP performance domains and also to conduct structured interviews with NASA personnel to identify which data do or do not exist currently (and for instances where such data exist, to evaluate the type, quality, accessibility, and confidentiality of those data). To complete this first objective, the authors took the following steps:

- 1. Defined outcome categories of performance that encapsulate BHP performance domains
 - Performance Outcome Categories: Behavioral Health, Task Performance, Team Performance,
 Psychosocial Adaptation, Cognitive Performance
- 2. Mapped BHP Research Risks and Gaps onto those performance outcome categories (see below)
- 3. Identified and prioritized indicators for each outcome category (for example, burnout may be an indicator of psychosocial adaptation)

In conjunction with completing the second objective as discussed above, the team completed the following steps:

- 1. Identified key points of contact (subject matter experts [SMEs]) as potential interviewees
- 2. Created a template for structured interview questions about sources and accessibility of performance data
- 3. Coordinated and conducted structured interviews with the SMEs
 - Targeted completion of 30 interviews

It became clear during collaboration that for the team to fully understand which data on performance metrics exist within NASA, it was important to understand how these performance metrics are related to the concept of mission success. In particular, if performance was imagined to be composed of factors beyond what is generally understood as task performance in the world of operations, it was important to capture these other factors so that analyses could clearly demonstrate their impact on mission success. Some other dimensions of performance are behavioral health and well-being, and teamwork. Thus, the interviews were used to capture different perspectives on performance and analyze how these different views influence performance metrics. To illustrate this concept, Figure 1 depicts a model of performance and how it relates to mission success. Certain predictors (such as stress, isolation, confinement, and other characteristics of a long-duration mission) were posited to influence specific outcomes (5 dimensions of performance) that, in turn, influence mission success.

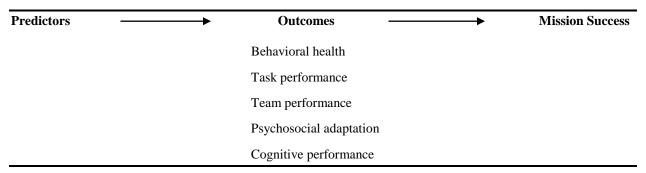


Figure 1. Overall model.

This evaluation demonstrated that certain forms of performance data do exist within NASA JSC, and the BHP Element and Operations groups need access to those data sources. A total of 22 forward action items were identified to pursue access to existing performance-related data; 11 of those items will require SLSD intervention, 10 require BHP follow-up, and 1 requires re-consenting of crew members. In other cases, data may need to be generated to address the requirements of the BHP Element for research on risk reduction and the needs of the BHP Operations group. The methodology, results, and implications of this effort, as well as forward work needed, are discussed below.

Methodology

The team began by first defining the outcomes (dimensions of performance) that comprise performance from the BHP collaborative perspective, according to the identified set of objectives for completing this task. Five dimensions of performance were identified: behavioral health, cognitive performance, psychosocial adaptation, task performance, and teamwork. Definitions based on current discipline standards were developed for each of these dimensions by the authors and are provided below.

Outcome Categories Defined for Behavioral Health & Performance¹

- 1. Behavioral Health
 - Refers to the relationship between an individual's behavior and the well-being (psychological and physiological) of the whole person (spirit, body, and mind) within his/her environment (cultural, vocational, social, and physical).
- 2. Cognitive Performance
 - An individual's ability to utilize mental processes including memory, attention, and executive functioning within his/her environment.
- 3. Psychosocial Adaptation
 - Goodness of fit between an individual's psychological strategies and the social exchange conditions of space flight environments.
- 4. Task Performance
 - The effectiveness with which individuals perform goal-directed activities or provide needed materials or services that contribute to mission success.
- 5. Teamwork
 - The level of effective coordination of team members' cognitive, verbal, and behavioral
 activities to organize task work and achieve collective goals that contributes to mission
 success.

The specific gaps that reside within the BHP Research Element were then compared to each of the 5 performance dimensions. The gaps for each of the three BHP Risks are defined below (Table 1); the definitions are followed by a table (Table 2) that illustrates what dimensions of performance are related to a specific gap within a given risk.

Behavioral Health & Performance Risks

Behavioral Medicine Risk: the Risk of Adverse Behavioral Conditions and Psychiatric Disorders

Team Risk: Risk of Performance Decrements due to Inadequate Cooperation, Coordination, Communication, and Psychosocial Adaptation within a Team

Sleep Risk: Risk of Performance Errors due to Sleep Loss, Circadian De-Synchronization, Fatigue, and Work Overload

¹ Key outcomes were identified and defined by the authors: the collaborative team of individuals from BHP Research and Operations Groups.

Mapping Gaps onto Defined Outcomes

Table 1. Gap for each Risk

Gap	Gap Description
BMed 1	What are the optimal methods to enhance behavioral health and prevent decrements before, during and after
	space flight missions?
BMed 2	What are the optimal methods to predict, detect, and assess decrements in behavioral health (which may negatively affect performance) before, during, and after space flight missions?
BMed 3	What aspects, if any, of cognitive performance change during flight? If there are changes, do they persist post
bivied 5	mission? If so, for how long?
BMed 4	What are the optimal methods for detecting and assessing cognitive performance during exploration missions?
BMed 5	What individual characteristics predict successful adaptation and performance in an isolated, confined, and extreme environment, especially for long-duration missions?
BMed 6	What are the optimal methods for treating the individual to remedy behavioral health problems during space flight
Divica o	missions (including behavioral health medicines)?
BMed 7	What are the optimal methods for modifying the environment to prevent and remedy behavioral health problems
	during space flight missions?
BMed 8	How do family, friends, and colleagues affect astronauts' behavioral health and performance before, during, and after space flight?
Team 1	Given the context of long-duration missions, what are the most likely and serious threats to task performance,
	teamwork, and psychosocial performance?
Team 2	Given the context of long-duration missions, what are the optimal ways to create tools to monitor and measure
	task performance, teamwork, and psychosocial performance?
Team 3	Given the context of long-duration missions, what additional approaches would enhance current in-flight
	interventions and countermeasures for supporting task performance, teamwork, and psychosocial performance?
Team 4	Given the context of long-duration missions, what are the optimal ways to select individuals and compose crews to
	ensure, optimize, and facilitate task performance, teamwork, and psychosocial performance?
Team 5	Given the context of long-duration missions, what are the optimal ways to train crews, leaders, and ground
	support to ensure, optimize, and facilitate task performance, teamwork, and psychosocial performance?
Team 6	Given the context of long-duration missions, what are the optimal ways to support and enable multiple distributed autonomous teams to support task performance, teamwork, and psychosocial performance?
Team 7	
ream /	Given the context of long-duration missions, how does constrained communication impact task performance, teamwork, and psychosocial performance?
Sleep 1	What are the best tools for detecting, monitoring, and assessing performance decrements due to sleep loss,
	circadian desynchronization, fatigue, and work overload?
Sleep 2	How is performance on ISS and Exploration missions affected by sleep loss, circadian desynchronization, fatigue,
•	and work overload?
Sleep 3	Does sleep loss continue on ISS and Exploration missions, or does adaptation occur?
Sleep 4	How can an individual astronaut's vulnerabilities to sleep loss and circadian rhythms best be determined?
Sleep 5	How can light be used to prevent and mitigate health, performance, and safety problems due to circadian,
	neuroendocrine, and neurobehavioral disruption, for flight, surface, and ground crews?
Sleep 6	How can individual crew members optimally use sleep and alertness medications before and during space flight?
Sleep 7	What are the health outcomes associated with chronic sleep loss, circadian desynchronization, fatigue, and work overload?
Sleep 8	What is the best way to integrate predictions of the effects on performance of chronic work-rest schedules (for
Sicch o	example, sleep restriction at different circadian phases, or split-sleep [nap] schedules at different circadian
	phases), and to mitigate these effects?
Sleep9	What are the countermeasures needed to recover from chronic partial sleep loss and/or slam sleep shifting, that
Siccps	permit recycling back into the same sleep-restricted schedules?
Sleep10	What tools, flight rules, and recommendations improve sleep loss, circadian desynchronization, fatigue, and work
	overload for flight and ground crews?

Behavioral Health and Performance Gaps by Outcome Category²

Table 2. Dimension of Performance

BMed Gaps	Team Gaps	Sleep Gaps	Outcome Category
1, 2, 3, 7, & 8	1-7	1, 2, 6, 8, & 9	Behavioral Health
4 & 5	1-7	1, 2, 6, 8, & 9	Cognitive Performance
6, 7, & 8	1-7	1, 2, 3, & 6	Psychosocial Performance/Psychosocial Adaptation
5	1-7	1, 2, 6, 8, 9, & 10	Task Performance
1, 2, 6 & 7	1-7	2, 6 & 8	Teamwork

Finally, an exhaustive list of possible indicators (measures) was developed for each of the performance dimensions, and the collaborative team came to a consensus on prioritizing each of these indicators for each outcome category. First, indicators were categorized according to their relevance to the 5 outcome categories. They were then prioritized into groups (1, 2, 3, etc.) according to their subjective proximity to the outcome category. The following question was posed to aid in this exercise: "If we had only one measure for an outcome, what would it be?" Indicators that were rated as most important were given a rating of "1." Those that were second in importance were given a rating of "2," and so on. The results of this deliberative process are shown in Table 3.

² Relevant gaps within BHP research were matched with target outcomes, so that each gap is grouped under outcome categories that are affected by that specific gap.

Prioritization of Indicators for Each Outcome Category

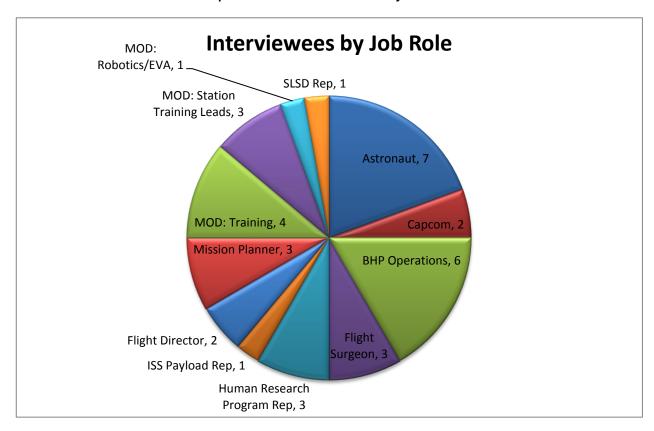
Table 3. Indicators / Outcome Categories

Indicators	Outcome Categories					
	Behavioral Health	Cognitive Performance	Psychosocial Adaptation	Task Performance	Teamwork Performance	
Adequate Coping	1		2			
Central Nervous System (CNS) – health of brain	3	3				
Cognitive Assessment		1				
Conflict Resolution					2	
Connection with Family			2			
Crewmate Rankings (sociometrics)			1		2	
Efficiency, Effectiveness, and Quality of Communications				2	1	
Emotional Labor/Load/Burnout	1		1			
Fatigue (physical and mental)	3	4				
Healthy Level of Stress	2		3			
Housekeeping Performance				2		
Irritability/High Frustration/Tolerance/ Resilience	1		2			
Leadership Role					3	
Learning/Memory Impairment		2				
Life/Job Satisfaction	2		1		3	
LMX/TMX/CMX (leader-member, team member, and crew member exchange)			1		1	
Meaningful Work			2			
Percentage of Tasks Completed				2		
Persistent Negative Mood/Affect States	1					
Personal Goals	3		3	3		
Physical Well-being	3					
Public Relations Events				2		
Quality of Support	2		3			
Rank Mission Objectives (# completed)				1		
Ratio of Tasks Completed to Their Duration				1		
Space Flight Resource Management (SFRM)				1	1	
Social Support	2		3			

Indicators	Outcome Categories				
	Behavioral Health	Cognitive Performance	Psychosocial Adaptation	Task Performance	Teamwork Performance
Synergy					3
Teamwork Coordination					1
Time of Task Completion				2	
Time Needed to Adapt to Mission or Environment			2		
Us vs. Them (crew vs. ground mentality, rather than crew and ground working together as one team)				3	2

This initial exercise resulted in the development of the structured interview template (Appendix A) and an analysis of data to determine which performance data metrics were priority measures from both components of BHP—Research and Operations. In conjunction with the development of the template, the collaborative team also made a list of key SMEs believed to be critical to interview owing to their operational experience, roles or responsibilities in the NASA JSC organization, or knowledge base with regard to the objectives of this activity. Efforts were made to ensure that a representative sample of organizations and departments that would likely possess different types of performance metrics was obtained. The following job roles were targeted: astronauts, CAPCOMs [i.e., spacecraft communicators], flight directors, Mission Operations Directorate (MOD) trainers, various job roles within MOD (mission planners, Robotics and extravehicular activity [EVA] representatives), representatives from the Human Research Program, a representative from the ISS Payload area and flight surgeons. Thirty interviews were completed over a 3-month period. Graph 1 illustrates the different job roles of those who were interviewed (note: the number exceeds the 30 represented in Graph 1, as certain individuals have more than one job role).

Graph 1. Number of Interviewees by Job Role



Interviews were conducted by the collaborative team with at least one representative from each area (BHP Operations and BHP Research); consent was obtained from the individual to record their interview. The template consisted of two portions; for the first portion of the interview, individuals were asked about examples of performance data for each of the 5 outcomes of performance. For the last portion, individuals were asked to describe how they would define mission success and to then provide specific examples of positive and negative examples of mission success, based on the definition they provided.

Analysis and Results

Interview transcriptions yielded a large amount of information pertaining to performance data metrics as well as definitions of mission success. Each of the performance measures suggested by interviewees was captured in a table illustration, along with the other information that was collected for it (Appendix B). To collect the other information for each measure, interviewers asked (when relevant) each individual for the name of the point of contact (POC), whether data for that measure existed, whether it could be obtained by BHP, and as a follow-up to the preceding question, if it couldn't, why not. Once this information was captured from each interview, the BHP Operations and Research team discussed and analyzed the performance metrics that were recommended. These discussions identified what forward work should be pursued.

Once all forward work was identified for each data point, it was then pertinent to focus on the measures with highest priority (listed in Table 4). The performance measures were prioritized according to the following criteria: ability of data to address specific gaps for BHP Research, ability to validate psychological support practices (such as training, social support, and selection), quality of data, availability of data to BHP Ops and Research, and cost/benefit ratio of time and investment. Appendix B provides a full listing of all performance measures that were suggested by interviewees (please note that the performance measures were first categorized by the performance dimension, followed by the existence of the data, and finally, our current accessibility to that data).

Table 4 summarizes the information relevant to the dimensions of performance (outcome categories) defined above that was gleaned from the interviews. Some basic limitations of these data should be noted. To begin with, some of the data that were claimed to exist (represented in the charts) may not actually exist. Thus, when reviewing the results in Table 4 and Appendix B, the reader should examine all columns for each data point to determine the existence and quality of the data as well as identified future work for the data point. In addition, the interviewees may not have given an accurate representation of the departments and organizations within JSC that might have performance metrics of interest to BHP. Furthermore, the results of this segmented effort may influence the data that are reported, and the reader should be aware that the authors were unable to obtain an exhaustive list of data that may exist. (See Appendix C for examples of actual data that were provided from SMEs while these interviews were being conducted.) Lastly, a note regarding the quality of the data: the reader should also be aware that much of the data that was suggested by the interviewees is anecdotal, subjective, and not standardized.

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³ As determined by the Human Research Program (HRP) Integrated Research Plan (IRP) and 2009 HRP Standing Review Panel Report.

Table 4. BHP High-Priority Performance Measures and Information Obtained from Interviews

Performance Dimension	Measure	Point of Contact	Does it Exist?	Can we Get it?	Why or Why Not?	BHP Forward Work
Behavioral Health	Russian training metrics	Russian chair of International Training Control Board (ITCB)	Yes	Yes	Requires internal agreement	Action item for SLSD Director to contact POC
	Medical occurrences	Biomedical Engineer (BME)	Yes	Yes	Possible anecdotal evidence	BHP to follow up with POC
	Supervisor evaluations	Astronaut Office (CB) Chief	Yes	No	Confidential; need agreement between CB and HRP	Recommend to SLSD director to contact POC for acquisition of data
	4. Medical kits inventory	Pharmacology/ Flight Surgeons	Yes	No	Private medical data; quality of tracking is questionable	Recommend to SLSD Director to contact POC
	5. Astronaut selection data	BHP Chief	Yes	No	Private medical data; would require consent	BHP to contact POC to discuss further
	6. Operational psychology debriefs	BHP Ops	Yes	Unsure	Unsure if data exists, useful, collected	BHP to contact POC to see what is collected
Cognitive Performance	7. Robotics target accuracy	Payload Development and Retrieval System (PDRS) Group Lead	Yes	No	Unsure if confidential or usable data	BHP to contact POC for further info
	8. Russian measures	Russian Mission Control Center (MCC)	Yes	No	Unsure if confidential or usable data; international collection & collaboration	BHP to consider application of these data to SRP rec.
	9. MRIs for astronauts	Flight Surgeons	Yes	No	Private medical information/ data	Re-consent individuals to include in future study; in flight and postflight as a baseline
Psychosocial Performance	10.Crew-ground interaction recordings	MOD	Yes	Yes	Limited resources to collect these data; numerous requests to no avail	Request to SLSD chief to formalize acquisition of these data
	11.BHP countermeasure metrics	BHP Ops Psyc Support Lead	Yes	Yes		BHP to contact POC to collect information
	12.Peer evaluations	CB Chief	Yes	No	Confidential	Request SLSD director to contact chief of CB for acquisition of data
	13.Observe astronauts in training flow	CB Chief	Yes	No	Confidential employment data; would require an agreement	Request SLSD director to contact chief of CB for acquisition of data
	14.Structured Interviews with Payloads Operations Director (POD)	POD	Yes	Unsure	Not really sure what the data are	Contact POC

Performance Dimension	Measure	Point of Contact	Does it Exist?	Can we Get it?	Why or Why Not?	BHP Forward Work
	15. Mission objectives completed	MOD/Increment Flight Lead	Yes	Yes	Unsure of informative potential of data	BHP to contact POC
	16. CB evaluation	CB Chief	Yes	No	Confidential data/employee information	Request to SLSD to contact POC and collaborate to create new agreement
Task Performance	17. EVA and Robotics feedback (data)	PDRS Group Lead	Yes	Unsure	Unsure if confidential or usable data	BHP to contact POC for further info
	18. Docking performance data	MOD	Yes	Unsure	Not sure of quality of data or accessibility	BHP to identify a POC and follow up
	19. Training proficiency data	MOD/DA7	No	No	No formal training ratings done currently	Request SLSD Director to contact POC to initiate systematic data collection
Teamwork	20. Crew-ground recordings (redundant from above)	MOD	Yes	Yes	Limited resources to collect these data; numerous requests to no avail	Request to SLSD chief to formalize acquisition of these data
	21. Watch/observe training flows (redundant from above)	CB Chief	Yes	No	Confidential employment data; would require an agreement	Request SLSD director to contact chief of CB for acquisition of data
	22. Observation of simulations	SFRM/MOD	No	No	Currently not formally collected	BHP recommendation to SLSD to establish formal data collection

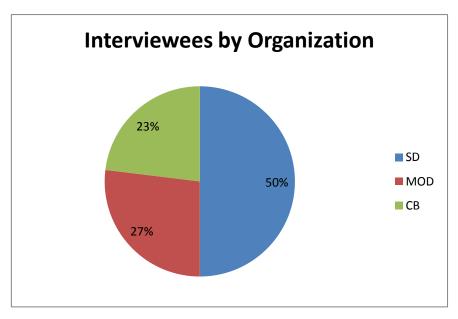
The definitions of mission success were also captured. This part of the interview was transcribed and then coded for two different purposes: first, to determine the viability of the 5 original dimensions of performance; and second, to create a parsimonious categorical structure that would fully encapsulate the definitions provided by the interviewees. This approach served to validate whether the 5 dimensions of performance map to the definitions of mission success across the organization. In the first method of coding, definitions of mission success were coded according to the original 5 dimensions of performance (behavioral health, cognitive performance, psychosocial performance, task performance, and teamwork). Upon completion of this coding method, the responses were re-coded according to overarching categories of mission success definitions that were identified. The following seven categories were used: area vision, mission objectives/goals, personal perspective, maintenance of crew health & well-being, performance, family & support group, and team dynamics (see Table 5 for definitions of these categories). Graphs 2 and 3 illustrate these different coding strategies for all of the participants. Graph 4 depicts the percentage

of interviewees from each organization (the Space Medicine Division [SD], the MOD, and the Astronaut Office [CB]), whereas Graphs 5-10 illustrate the two coding strategies by NASA organization.

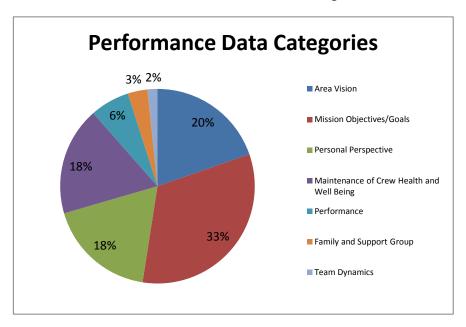
Table 5. Definitions of Mission Success Categories

Area Vision	How a particular organization, section, or department defines and views "mission success"; typically, it represents their concrete criteria for mission success (for example, flight surgeons' primary concern is health of crew).
Mission Objectives/Goals	Objectives and goals are set and prioritized for each mission. If goals are met, or a percentage of goals are met, the mission is considered successful, and vice versa, if goals are not met, the mission is unsuccessful.
Personal Perspective	How the interviewee views "mission success" from their own personal, individual perspective, not taking into consideration their current or past organization's purposes and directions.
Maintenance of Crew Health and Well-Being	How a crew member's health is affected by a mission, comparing their health before the mission to their postflight health.
Performance	How well, or not, a crew member or crew does on tasks they complete or attempt to complete.
Family and Support Group	How the family members or immediate support group of the crew (friends, others outside of immediate family) fared before, during, and after the mission.
Team Dynamics	Any variables related to aspects of teams (for example, cohesiveness and teamwork) and how effective they were over the course of the mission.

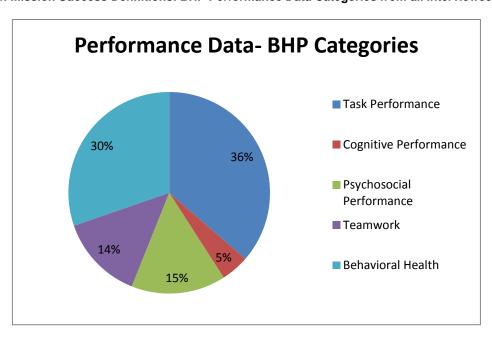
Graph 2: Percentage of Interviewees from each of Three NASA Organizations



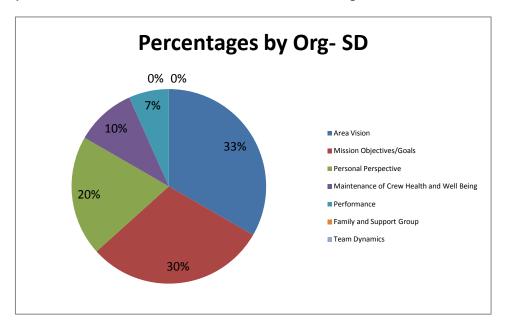
Graph 3: Mission Success Definitions: Performance Data Categories from all Interviewees



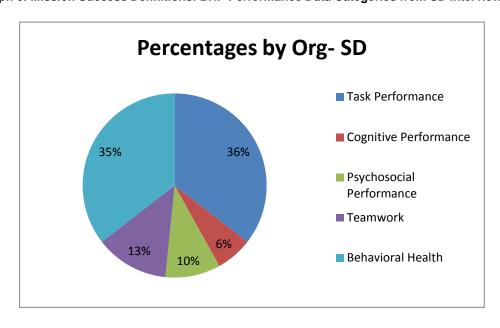
Graph 4: Mission Success Definitions: BHP Performance Data Categories from all Interviewees



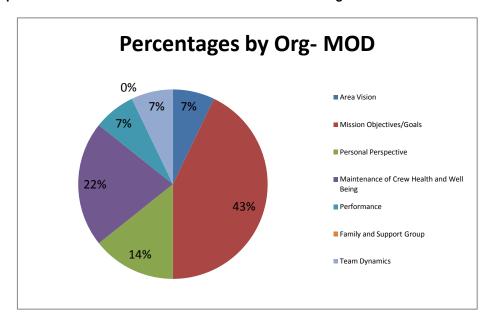
Graph 5: Mission Success Definitions: Performance Data Categories from SD Interviewees



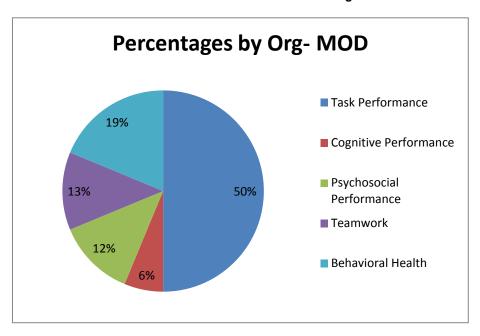
Graph 6: Mission Success Definitions: BHP Performance Data Categories from SD Interviewees



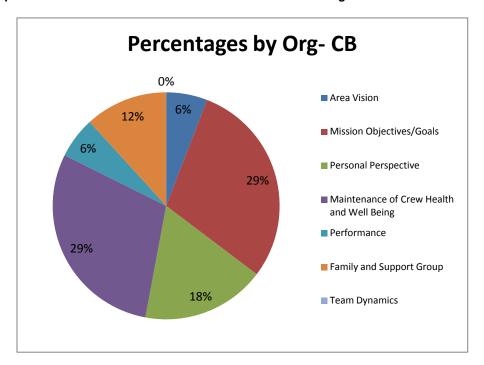
Graph 7 Mission Success Definitions: Performance Data Categories from MOD Interviewees



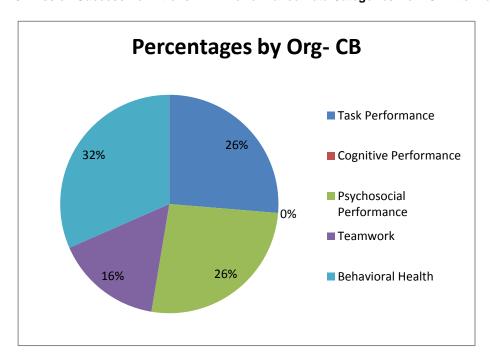
Graph 8: Mission Success Definitions: BHP Performance Data Categories from MOD Interviewees



Graph 9: Mission Success Definitions: Performance Data Categories from CB Interviewees



Graph 10: Mission Success Definitions: BHP Performance Data Categories from CB Interviewees



Discussion

Summary

This collaborative effort was an initial step in establishing a systematic approach to identifying what performance data currently exist within NASA JSC that may be relevant to both components of BHP—Operations and Research. Specifically the effort yielded a systematic approach for objectively assessing the existence and accessibility of current performance-related data owned by different groups at JSC. As part of this effort, interviewees were asked to describe measures (indicators) of performance and to give their definitions of mission success, to evaluate how the relevant BHP-related performance data compared with the varied definitions of mission success that were captured from the interviewees. Identifying and defining mission success also needed to be done to theoretically link the identified performance measures with factors of ultimate mission success that they might mediate. The conclusions drawn from both the mission success definitions and the performance indicators (measures) that were identified are provided below.

To begin with, as is apparent from the pie charts (Graphs 2-10), interviewees provided many interpretations of mission success, with differences not only between interviewees but also between organizations. In general, we may interpret these results as indicating that mission success is multifaceted and comprises many factors beyond simply the safety and performance aspects of the crew that are usually cited. It is noteworthy that a large disparity existed in the level of specificity provided by these interviewees; some individuals provided specific definitions of mission success (perhaps related to their group or departmental organization), whereas others provided more generic definitions of mission success, describing more of an overall NASA perspective of success (for example, all missions have been successful, even the failures, because lessons were learned)

Some noteworthy quotations that provide more insight into the level of disparity of these definitions about mission success are provided below:

- "Every player in the chain of operation probably has a different definition."
- "Compensating with the system for what the human doesn't do so well"
- "It's hard for the agency to acknowledge anything less than success & it's hard for the agency to quantify success."
- "I don't believe mission success is complete if the training flow, mission, and results at the end cause so much family strife that the family is destroyed."
- "If nobody dies, it's a success."

However, analyses mapping these different definitions (with varied levels of scope) to the initial 5 categories (behavioral health, cognitive performance, psychosocial performance, task performance, and teamwork) that were developed through this collaborative effort were successful. Thus, it was possible to place each interviewee's definition of mission success in one of the defined categories.

The ability to categorize all of these dynamic and varied definitions in the 5 BHP Performance Data Categories may signify that the performance categories were too broadly defined and served as "catchall" buckets that any definition of mission success would seemingly fit under. Although this possible limitation is acknowledged, it is more likely that these 5 categories identify a unique contribution to mission success, and that mission success represents more than just task performance, as it is often defined at a general level by the organizational culture. To exemplify this point, the authors conducted a quick Internet search with the terms "NASA mission success." It yielded many results that focused solely on completing mission objectives and on safety practices. Thus, one conclusion that may be drawn from this analysis of mission success is that the NASA organization must consider a broader definition of mission success across the entire organization. Because many groups in NASA work in areas outside of the narrow scope of completing mission objectives and working safely, the communication of what defines mission success must have a broader scope. All NASA groups provide a critical component to achieving mission success, and the aforementioned aspects are not clearly represented in these narrow definitions. This recommendation will be discussed further in the Forward Work section of the report.

To summarize the collection and analysis of the performance measures that were obtained, this collaborative effort was able to obtain a high volume of potential data; however, much of the data was not of high quality and/or accessible to the BHP groups. In addition, much of the data was not systematically collected in all 5 of the BHP Performance Data Categories that were defined; metrics that were provided were often anecdotal, and if quantitative, were often haphazardly collected and not systematically kept. Finally, much data that was identified and systematically kept and maintained often fell within a confidential category in which the data were inaccessible to the BHP groups. This collection and analysis effort has brought many conclusions, which are described below.

First, it is concluded that there is a low level of standardization for data collection across the entire NASA organization; no repository exists for data that are currently being collected that addresses the performance categories that have been discussed. Although efforts like the Longitudinal Study of Astronaut Health (LSAH), the Life Sciences Data Archive (LSDA), and the SF Operations Habitability Database (OpsHab dbase) have established databases that may yield information relevant to some of the

categories defined by BHP, not all categories are represented. In addition, raw data in some of these repositories still lack accessibility, which creates further limitations in being able to utilize the data.

Second, it is concluded that much of the performance data that were identified is most often subjective; thus, access to objective data is severely lacking. Also, although some anecdotal data that were collected may be considered objective (such as the VAMS [Video Asset Management System] video library), this information is often provided in a public forum or is made available to the public; thus, these data are often sanitized, which adds to range restriction issues.

Finally, when data have been deemed relevant and of high potential to be useful to BHP, accessibility issues arise. Accessibility is also an issue for data that were identified as a need but did not actually exist. For example, a mechanism for collecting systematic debriefs of returning astronauts that is relevant and accessible to both BHP Operations and Research does not currently exist. When considering the other forward work actions designated in Appendix B for each performance data metric, it is important to note that availability of resources is a critical factor in obtaining existing and accessible data, as gathering, cleaning, and analyzing data metrics that have been identified as having high potential will require a large number of labor hours.

Forward Work

For forward work, the authors make the following recommendations:

- An accessible data repository for knowledge management should be established by the Agency.
 - To capitalize on existing data collection efforts, utilize data that is collected to its full potential, and move toward a more innovative approach in which research and operational groups within NASA work together synergistically to achieve mission success, it is imperative to establish a Knowledge Management System for data. Further, an organizational culture in which integrated data are collected, shared, and analyzed must be established to support such a Knowledge Management System as the one proposed. As part of this management system and organizational culture shift, it will also be important that participants (including flight control personnel, astronaut crews, and others) do not feel objectified, and that feedback from those who analyze the collected data is shared with the participants (while protecting confidentiality). Finally, within this Knowledge Management System, research data collected should be used to validate and improve practices in operations.

Standardize methods to collect and store data across the Agency.

Standardization of methods to collect and store performance data would allow accessibility to those who have a valid justification for access and use of the data. However, it is acknowledged that different levels of access must be considered, especially with highly private and confidential data.

• Establish an encompassing mission success definition.

As was described, it is apparent from the data collected for this effort that mission success is a
multi-level, multi-dimensional concept. Thus, there is a need for the organization to articulate a
mission success definition that is more current and encompassing.

If data collection continues to be conducted as it has in the past and present, problems with accessing data, silo issues in different groups across the organization, and an overall lack of integration of critical data to both promote operational success and reduce risk of future missions will continue. These issues are also associated with continued repeated and wasted effort, exorbitant and unnecessary costs, and unnecessary duplication of collecting data from participants (this is especially true when considering astronaut time and resources).

Specifically to the BHP Performance Data Effort, the collaborative team will begin with addressing the high-priority items from the performance measures that were identified in Table 4. From the data that are ultimately obtained and deemed usable, BHP Research will utilize any data that are ultimately collected to address research gaps, whereas BHP Operations will utilize meaningful data to validate current practices. In addition, specific measures that were identified as high priority (see Appendix B) will be carried forward to the SLSD director, either for data that may not exist but should, or data that do exist but BHP cannot currently access.

Lastly, forward work should address some of the limitations in this current effort. As was described above, interviewees were specifically only from JSC and did not include personnel from the other NASA centers. Furthermore, not all organizations within JSC were represented (such as Human Adaptation and Countermeasures Division [SK] and SD). For these reasons, it is likely that many performance data metrics were not captured that may exist and may be relevant to the BHP Performance Data Categories as they are defined. Thus, we recommend that this effort be continued and carried by the SLSD to capture all organizations within JSC, all centers across NASA, and a larger population of interviewees in operations, as many of the interviewees were research personnel. This effort should coincide with the task of developing an accessible repository for knowledge management across NASA.

References

- Sipes, W. & VanderArk, S. (2005) Operational Behavioral Health and Performance Resources for International Space Station Crews and Families. Aviation, Space, and Environmental Medicine 76 (6), 36-41.
- Bachmann, R.E., Sowin, T.W., Bagian, J.P., Bauer, M.S., Fraser, J.R., Yerkes, S.A., Holmes, E.K., & DeLaney, P.M. (2007) NASA Astronaut Health Care System Review Committee. Institute of Medicine (IOM).

Appendix A: Template for Structured Interviews

Structured Interviews for Performance Data Effort

Name:		D	ate:	
Organization:				
Job Background:				
Interviewed by:				
Ops: Al Lacey K	elley			
Research: Lauren Camillo	e Kathryn	Cristina		
A. Mission Success				
Please describe how you would specific examples of both success				provide
B1. Performance Data				
Behavioral Health				
Construct	Data/ Measure	9	Does data exist?	Feasibility
	_		 	<u> </u>

Construct	Data/ Measure	Does data exist?	Feasibility

3. Psychosocial Performance/Psychosocial Adaptation

Construct	Data/ Measure	Does data exist?	Feasibility

4. Task Performance

2. Cognitive Performance

Construct	Data/ Measure	Does data exist?	Feasibility

_	_			
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Construct	Data/ Measure	Does data exist?	Feasibility

B2. Performance Data

What specific data do you have (or 'house', or are responsible for, or you are aware of that is in your area) that would be helpful to this effort?

Ex: selection data/medical files/winscat/training

C. Additional Questions

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2. Can you recommend anyone else that we should talk to that either (a) has access to data or (b) is knowledgeable about existing data?

Appendix B: Forward Work Decisions

Decision Points (for each Outcome Variable):

- Yes, Yes
- · Yes, No
- Yes, Unsure
- · No, No
- · No, Yes
- No, Unsure

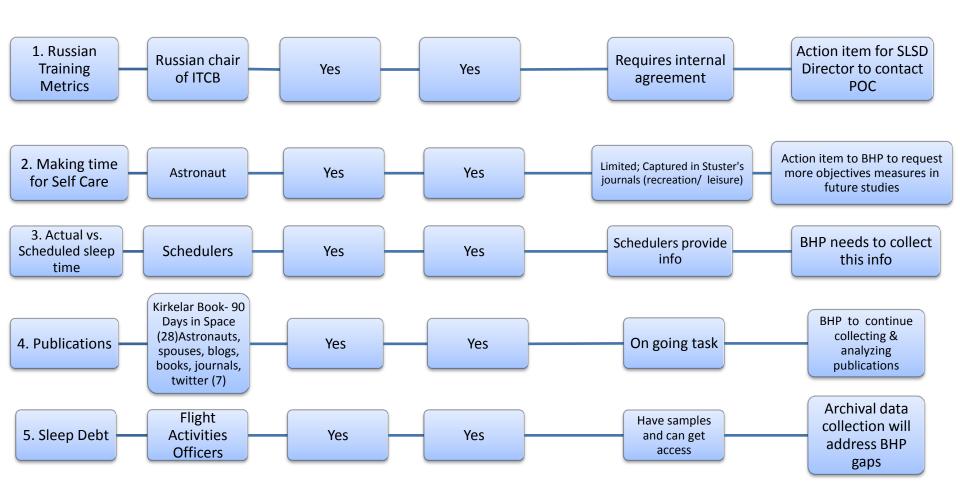
Data/Measure

Point of Contact

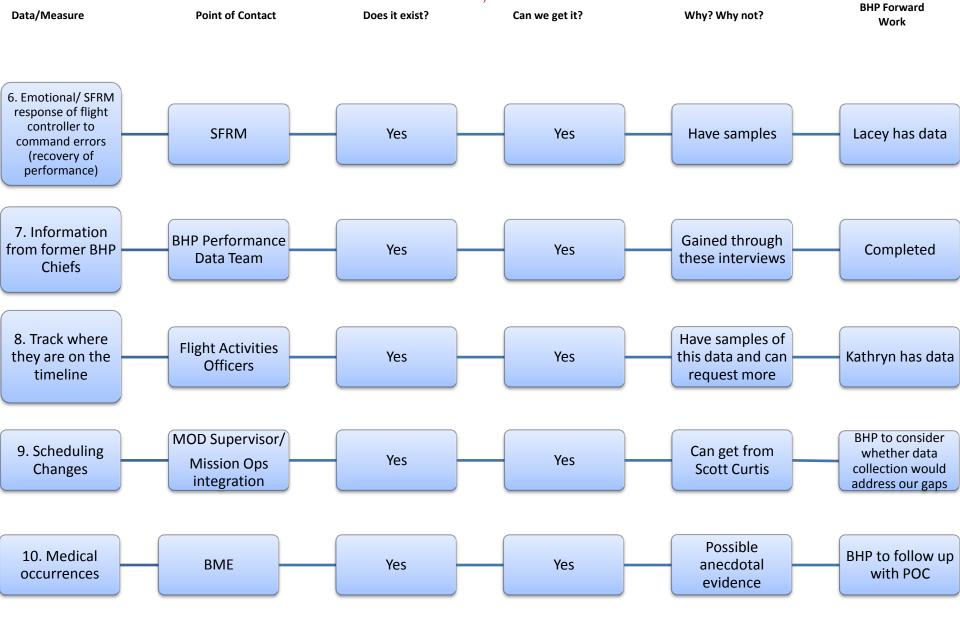
Does it exist?

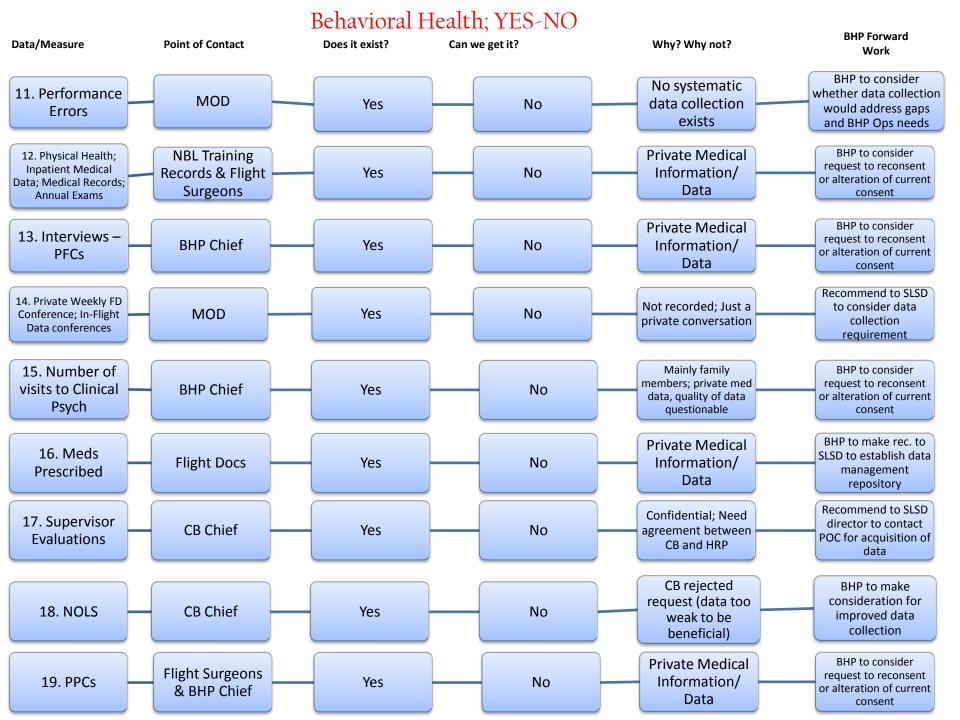
Can we get it? Why? Why not?

BHP Forward Work









Behavioral Health; YES-NO **BHP Forward** Data/Measure **Point of Contact** Does it exist? Can we get it? Why? Why not? Work Private Medical Recommend to 20. Med Kits Pharmacology/ Data, quality of Yes No SLSD Director to Inventory Flight Surgeons tracking is contact POC questionable BHP BMed RAM 21. Physiological look at informed Research data from bed Nο **FAP Project Scientist** Yes consent to medical data determine if we can rest have data 22. Eye BHP to consider Research screening for collecting data: No **FAP Project Scientist** Yes vision issues for Medical Data assigned to BMed Ram Bed Rest study BHP to make Private medical 23. Post Flight recommendation to **BHP Chief** Yes No information/ **PPC Debriefs** SLSD to obtain data consent Private medical BHP to contact 24. Astronaut **BHP Chief** No POC to discuss Yes data; would Selection Data require consent further BHP will not pursue Private medical data at this time 25. PMCs Yes No Flight Surgeons data; unsure if due to quality of data is useful data BHP to make 26. Actual vs. recommendation to SLSD Scheduled sleep **Barger Studies** Yes No PI owns data to establish data time management repository Not consented to BHP to consider 27. Regular comm. w/ BHP Ops, BHP request to reconsent Yes No share that family; Family Support; Chief or alteration of Frequency of PFCs information/data current consent

Behavioral Health; YES-UNSURE **BHP Forward** Why? Why not? Data/Measure **Point of Contact** Does it exist? Can we get it? Work Data is not relevant bo BHP will not BHP not a valid 28. Attendance at Life Sciences Lead Yes Unsure pursue data at indicator; Scheduled Researcher scheduled exercise exercise is notthis time indicative of health BHP doesn't BHP will not 29. Weight Flight Surgeons need it; too Yes Unsure pursue data at Change robust this time BHP to consider May be no reason collecting cortisol Pharmacology, to get, not useful, N/A 30. Cortisol Yes data to address BHP archival collection **Immunology** gaps (Contact not beneficial Ginger Wotring) Data voluminous BHP will consider to with small # of 31. Photostart task with Flight Surgeon Yes N/A incidence-difficult Content analysis increase in to tie to specific resources BHP issues Data voluminous BHP will consider to 32. Daily reports with small # of start task with N/A Yes from ISS—content PAO incidence-difficult increase in analysis-PAO to tie to specific resources **BHP** issues BHP to consider May be no reason collecting 33. Physiological to get, not useful, N/A Yes Unsure physiological data archival collection **Heart Rate** to address BHP not beneficial gaps BHP Recommends to Data doesn't SLSD to request or **34. TAMS** MOD Yes N/A address BHP needs; require better training statistics collected and not useful training progress tracked

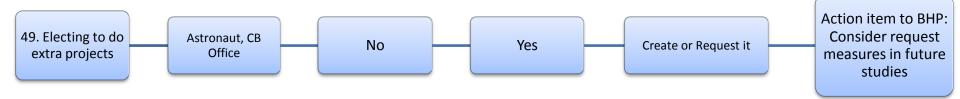
Behavioral Health; YES-UNSURE

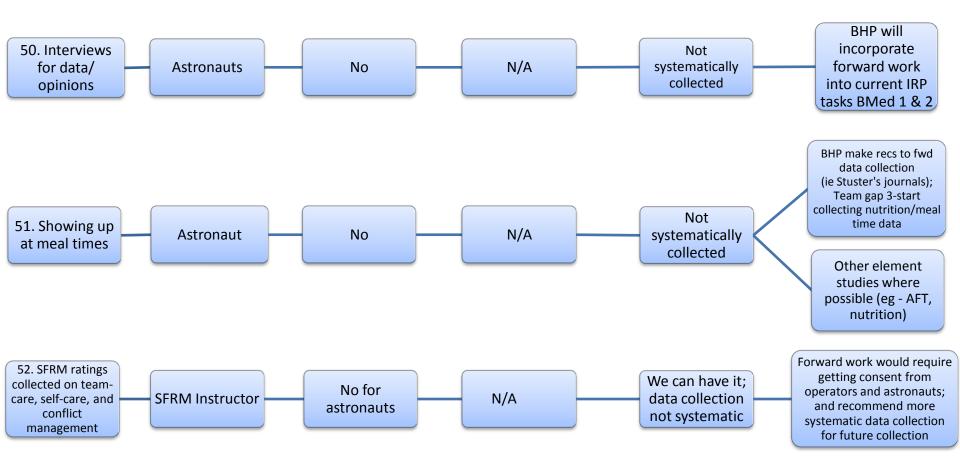
BHP Forward

Data/Measure Point of Contact Does it exist? Can we get it? Why? Why not? Work BHP to investigate 35. Centrifuge May have Yes Unsure and research with Neurobehavioral Lab published data Study Data POC BHP to investigate 36. Lunar Analog **Project Scientist** Research Yes Unsure and research with Study Data for FAP medical data POC BHP to investigate 37. Campaign 3 **Project Scientist** Research Yes Unsure and research with for FAP medical data Data POC 38. Doubles BHP to investigate **Project Scientist** (DBLS)- Daily Research Yes Unsure and research with Bone Load for FAP medical data POC Stimulus Data BHP to investigate 39. Bone Loss Research Yes Unsure **HHC Manager** and research with medical data Data POC Unsure if data BHP to contact 40. Op Psy **BHP Ops** Yes Unsure exists, useful, POC to see what Debriefs collected is collected Unsure if data is BHP to contact 41. Robotic **Robotics** Robotics/POC to inquire Yes Unsure useful; may be about data and **Docking Data Training Lead** confidential accessibility 42. SFRM ratings fwd work would require We can have it; getting consent from collected on Yes for operators and astronauts; data collection team-care, self-SFRM Instructor Unsure and recommend more operators care, and conflict not systematic systematic data collection for management future collection

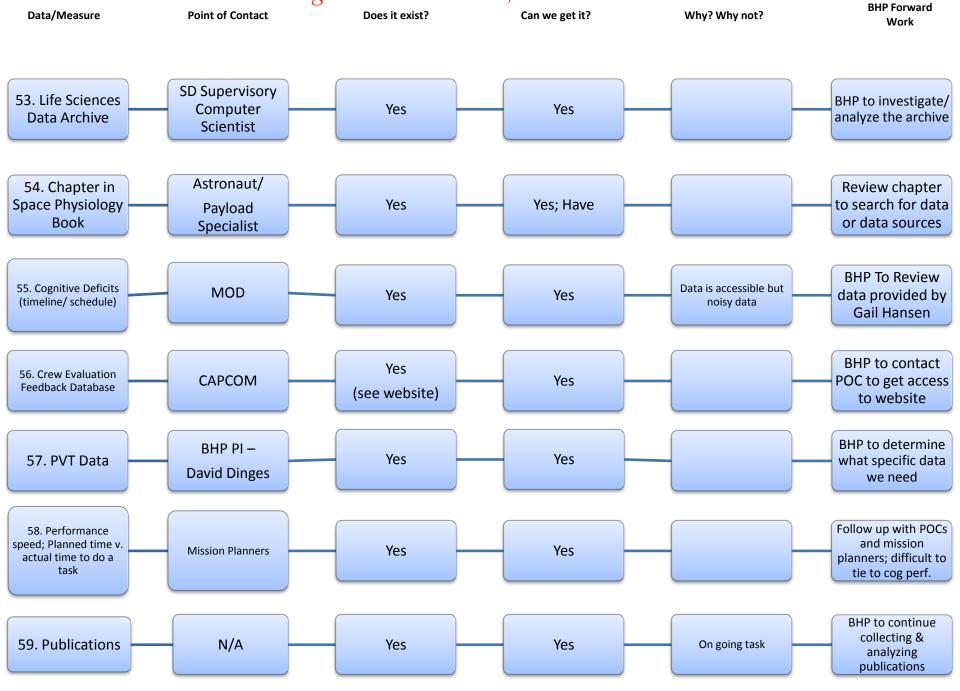
BHP Forward

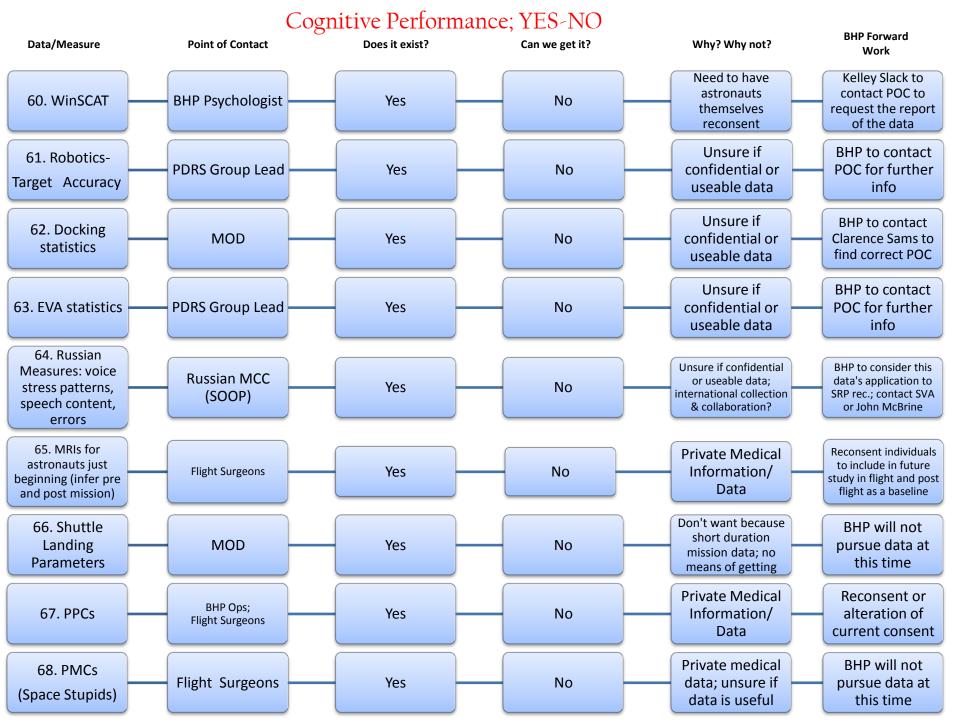
Data/Measure	Point of Contact	Does it exist?	Can we get it?	Why? Why not?	BHP Forward Work
43. Info from Flight Surgeons	Flight Surgeons	No	No	People have not been interviewed yet	BHP to interview Flight Surgeons
44. NASA Mir CMs	СВ	No	No	People have not been interviewed yet	BHP to interview Mir Astronauts
45. Individual Activity level compared to baseline levels (depression/ anxiety)	N/A	No	No	Currently not formally recorded/ collected	BHP to consider whether data collection would address our gaps
46. Perceived frustration levels and outlets	N/A	No	No	Currently not formally recorded/ collected	BHP to consider whether data collection would address our gaps
47. Venting to ground controller	CAPCOM & Flight Director	No	No	Currently not formally recorded/ collected	BHP to consider whether data collection would address our gaps
48. Interview Lead Crew Rep.	MOD	No	No	Currently not formally recorded/ collected	BHP to consider whether data collection would address our gaps

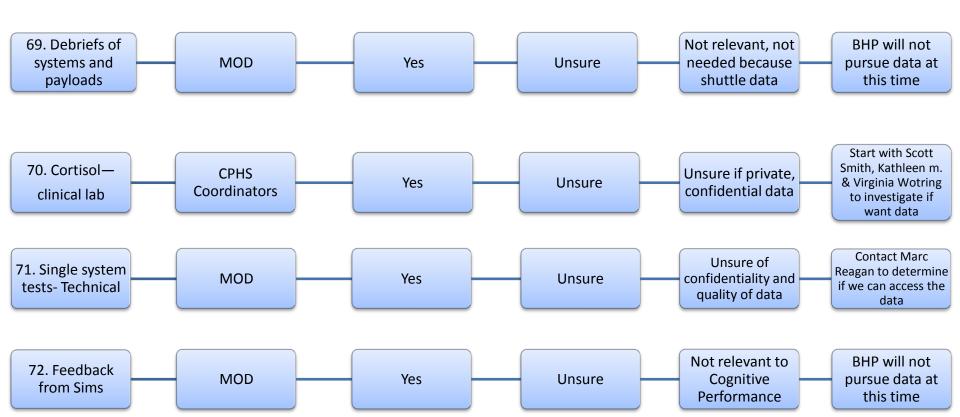


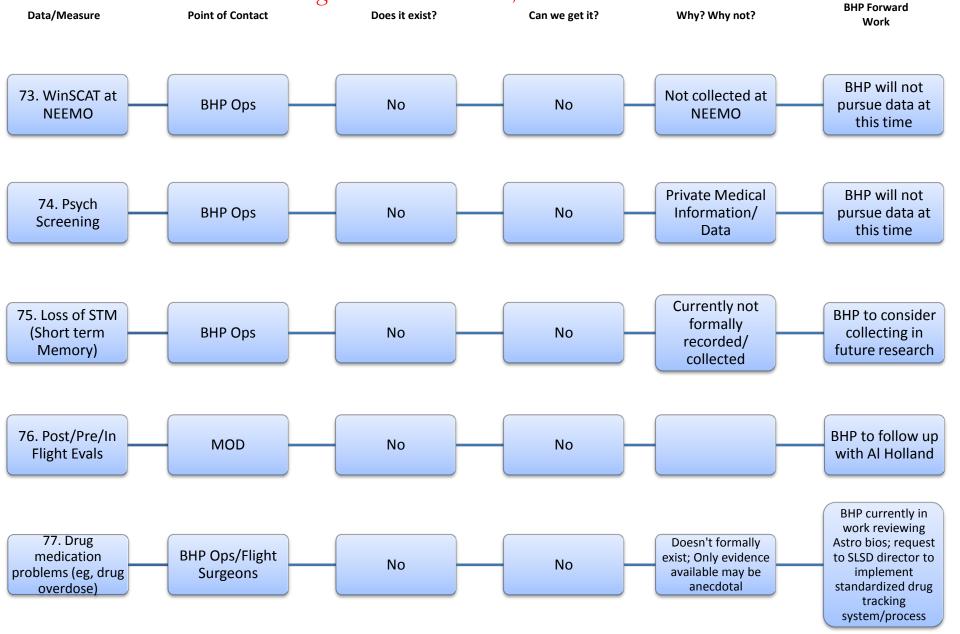


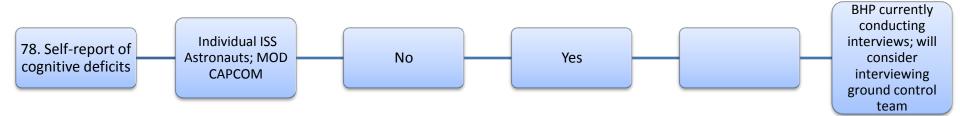


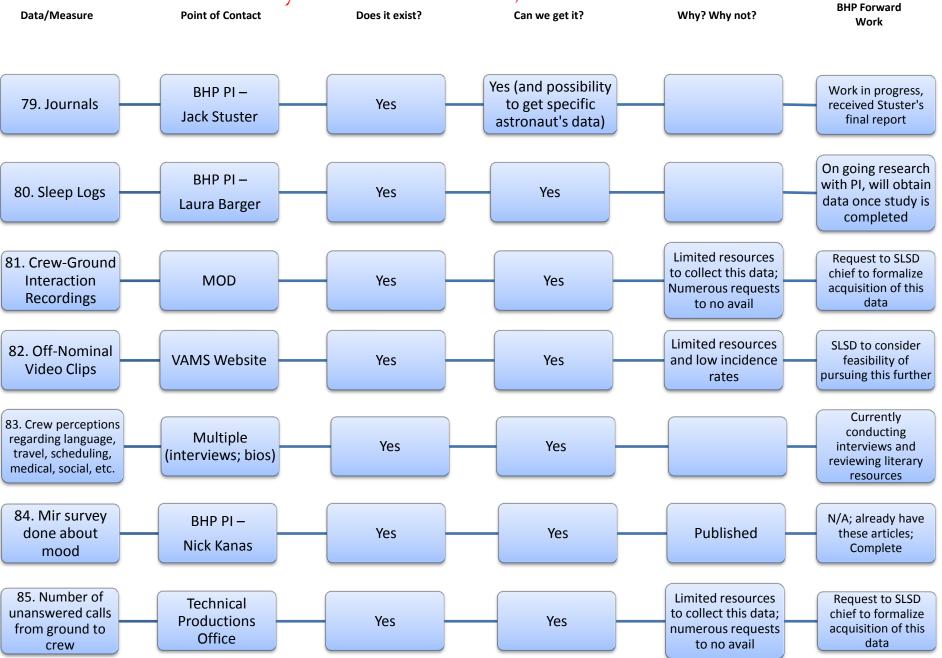




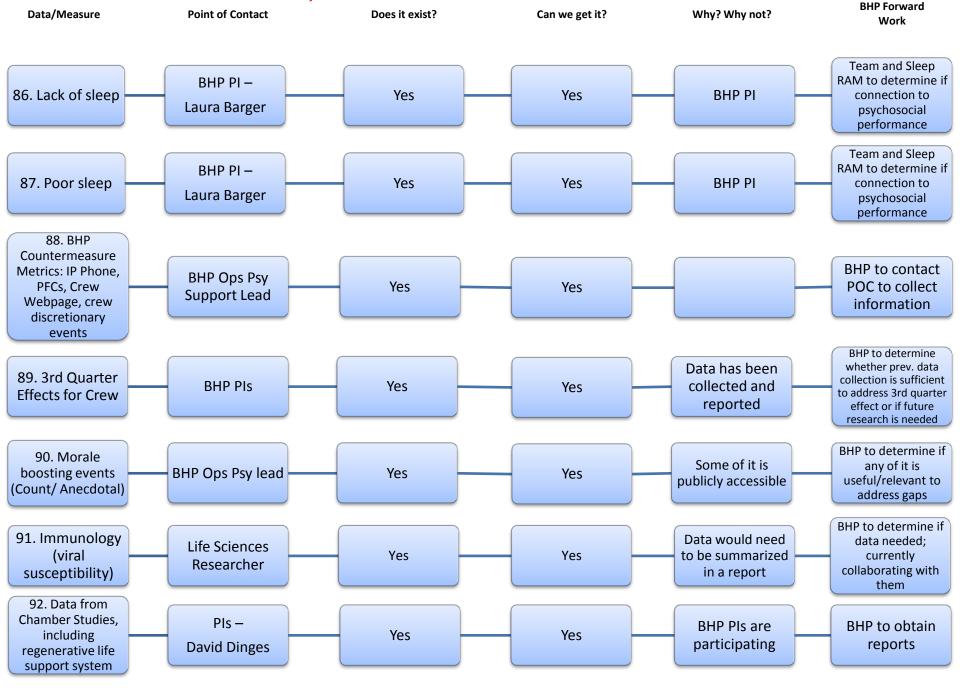


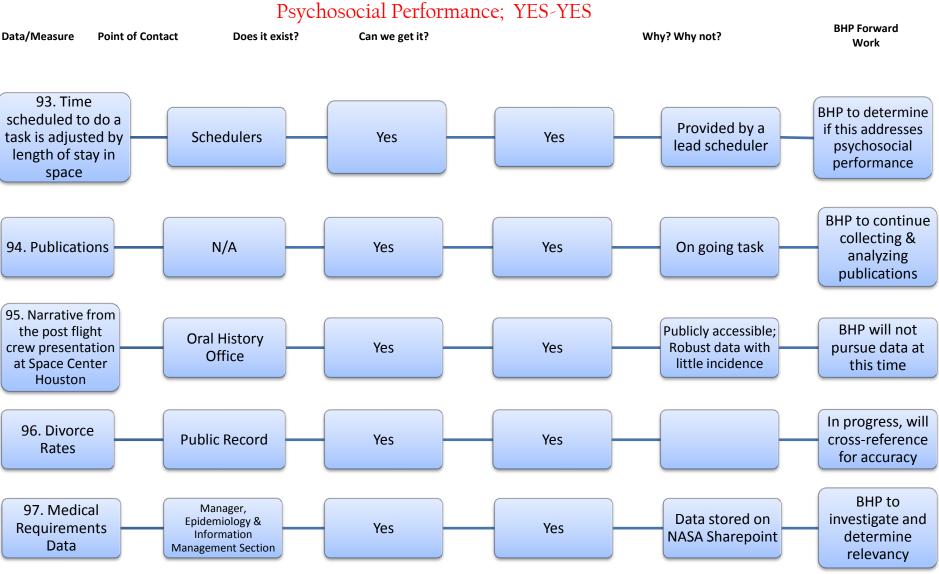






Psychosocial Performance; YES-YES





Yes

Yes

98. Antarctic

Research

BHP PIs

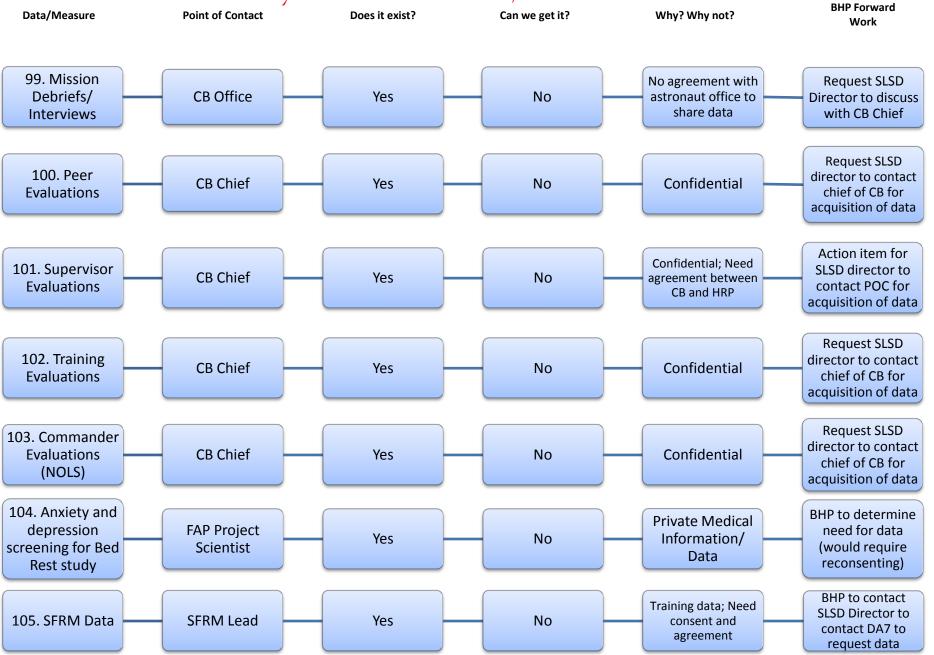
In progress;

Reviewing

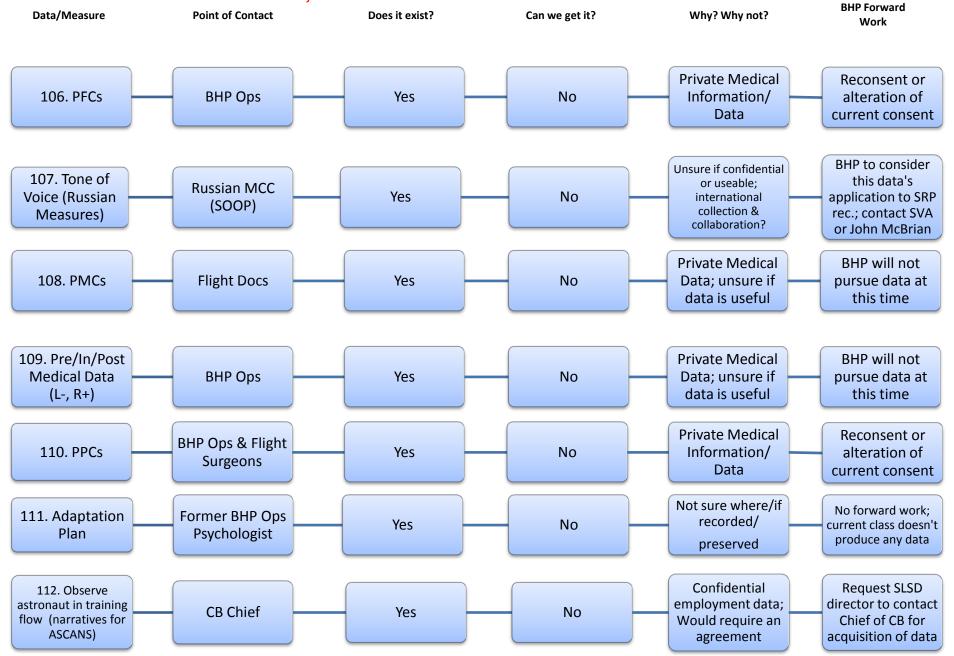
literature

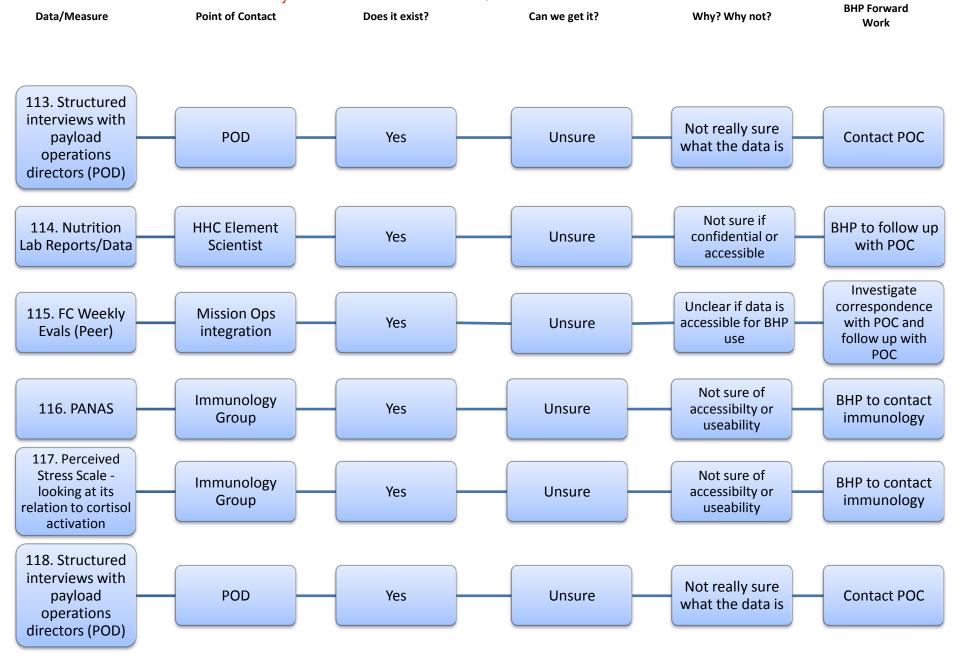
Published

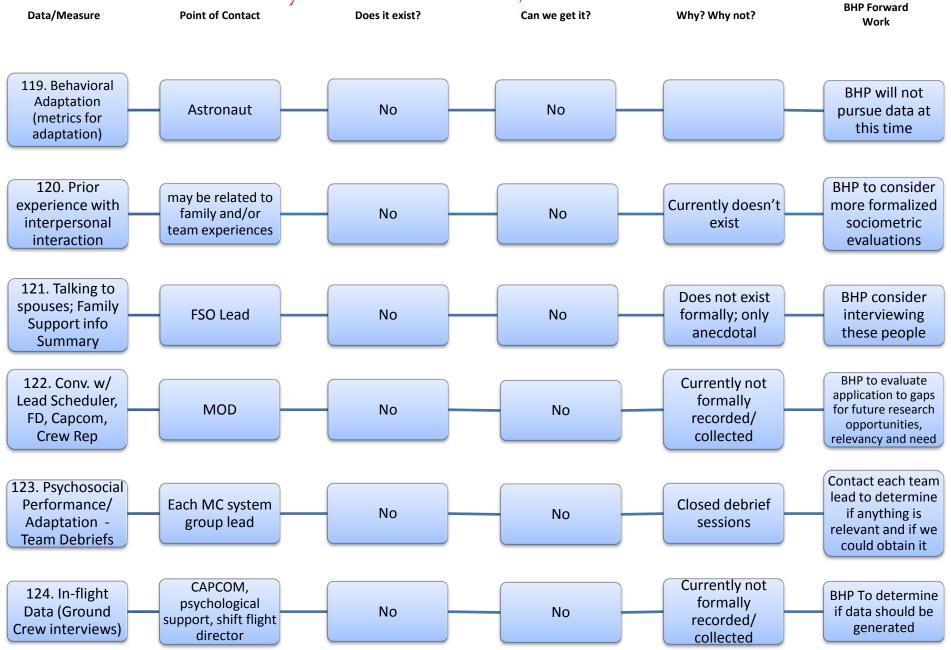
Psychosocial Performance; YES-NO

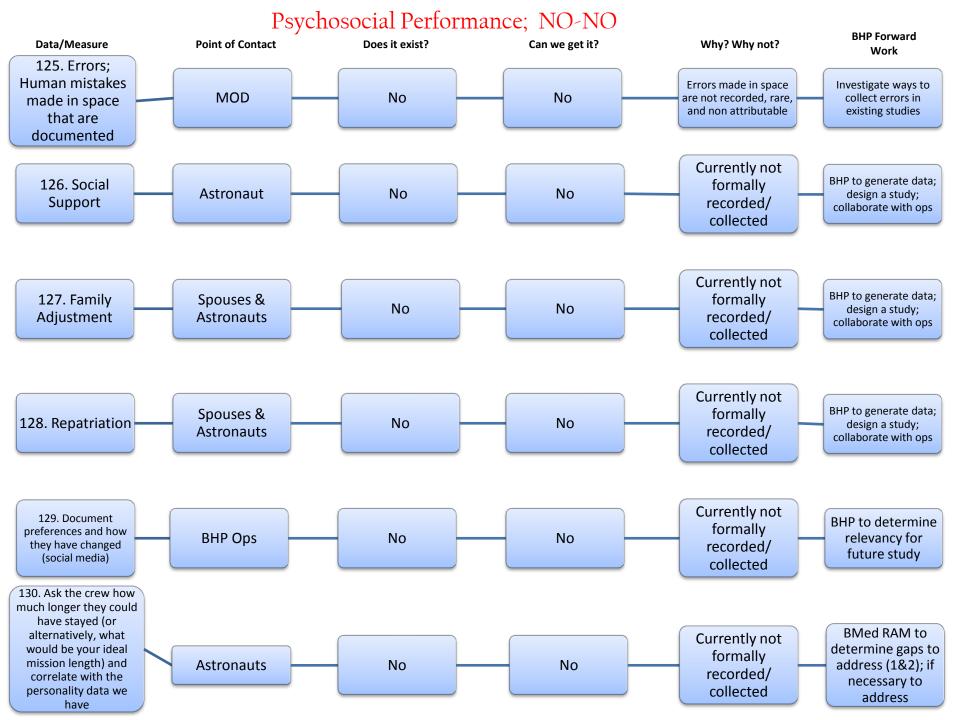


Psychosocial Performance; YES-NO



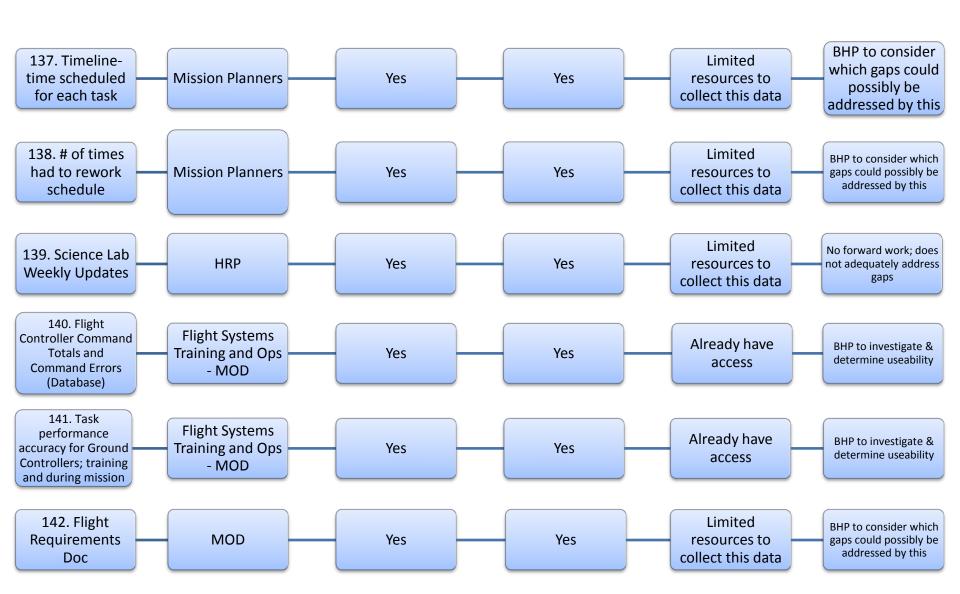




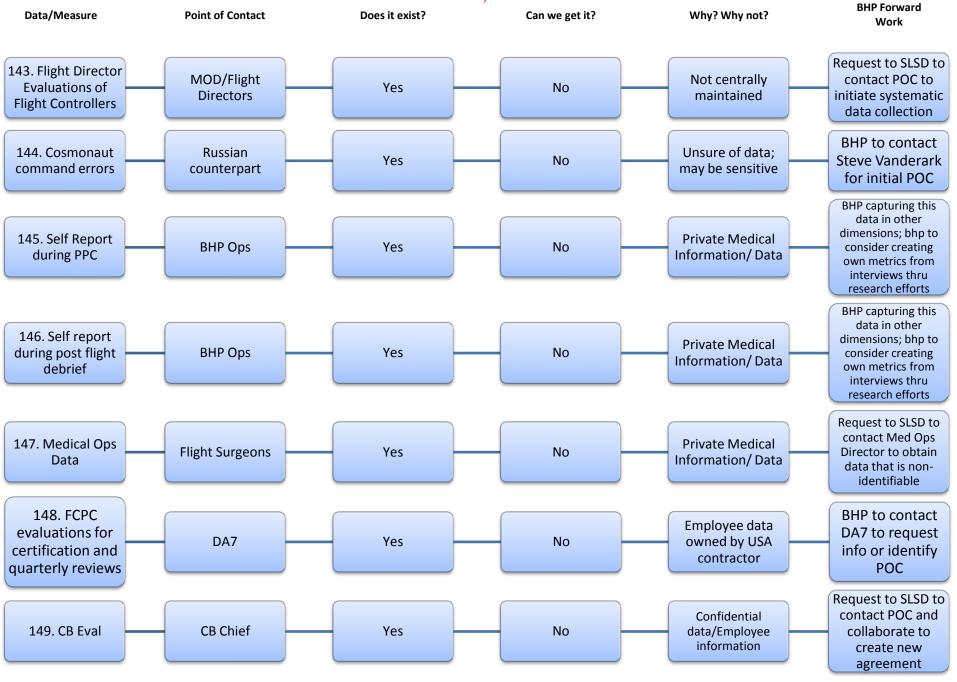


BHP Forward

Why? Why not? Data/Measure Point of Contact Does it exist? Can we get it? Work Not sure how 131. Integrated Shuttle (Knowledge BHP to follow up, data is kept and Medical Model, 2 Management)-ISS Yes Yes investigate and if accessible/ (Epidemiology) determine relevancy places for debriefs useable to us 132. Mission Unsure of MOD/Increment BHP to contact Yes informative **Objectives** Yes **POC** Flight Lead potential of data accomplished BHP to review 133. # of changes Unsure of quality to schedule once gaps to Mission Planners Yes Yes of data; too few been finalized determine resources (ISS) relevancy BHP to review 134. Log of issues Unsure of quality Lead Flight gaps to that need to be Yes Yes of data; too few Director determine worked resources relevancy 135. Payload Not sure of Yes, Public BHP to contact anomaly reports **Physical Scientist** Yes quality of data or (PAR); Performance Information POC accessibility errors 136. Increment lessons learned; Not sure of BHP to contact Aerospace Yes, Public Performance Yes quality of data or Engineers Information POC improvement?/ accessibility errors?



Task Performance; YES-NO



Data/Measure

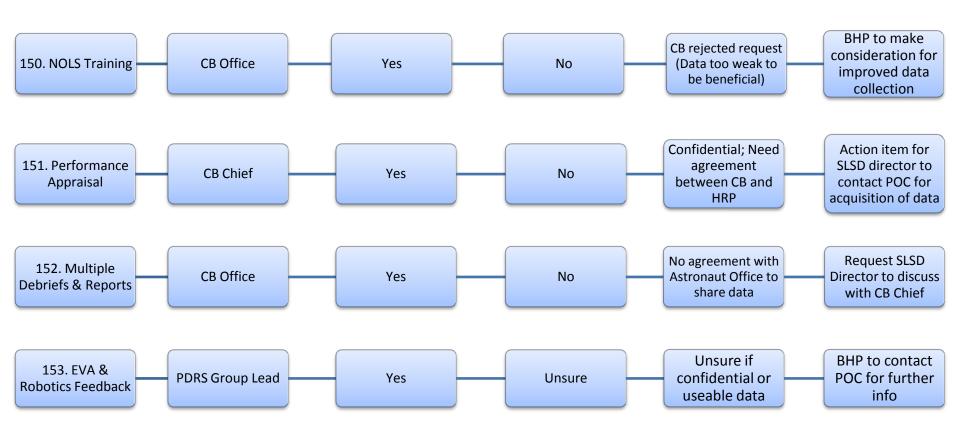
Point of Contact

Does it exist?

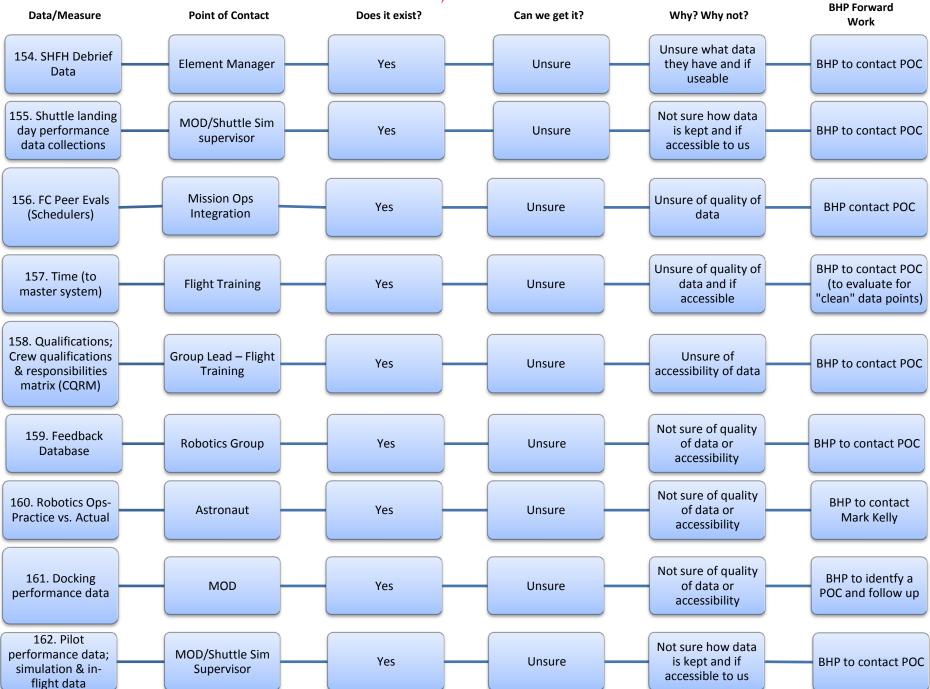
Can we get it?

Why? Why not?

BHP Forward Work



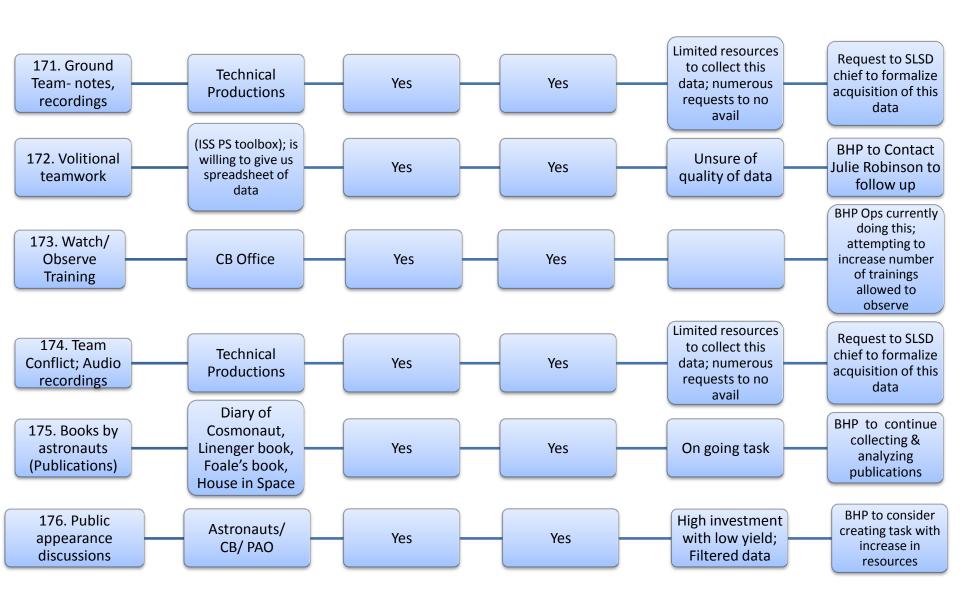
Task Performance; YES-UNSURE



Task Performance; NO-NO **BHP Forward** Data/Measure **Point of Contact** Does it exist? Can we get it? Why? Why not? Work request to SLSD No formal 163. Training Director to contact MOD/DA7 No No training ratings Ratings to POC to initiate done currently systematic data collection Currently not 164. Did task BHP to consider formally No require help from Unsure No recording this data, recorded/ if resources allow ground/crew? collected Assume not 165. CAPCOM BHP to contact **CAPCOM** No No currently **Evaluations** POC collected Currently not BHP to consider 166. MOD formally recommendation & MOD No No **Evaluations** recorded/ determine if addresses gaps collected Currently not BHP to consider 167. Flight formally recommendation & **Flight Directors** No No Director determine if recorded/ **Evaluations** addresses gaps collected Currently not BHP to consider 168. % of tasks MOD/Flight formally recommendation & No No worked on Schedulers recorded/ determine if during free time addresses gaps collected These Request to SLSD 169. EVAs- NBL MOD/CB Office No No comparisons do to systematically vs. Actual collect this data not exist Request SLSD Director to contact No formal POC to initiate 170. Training MOD/DA7 No No training ratings systematic data proficiency data

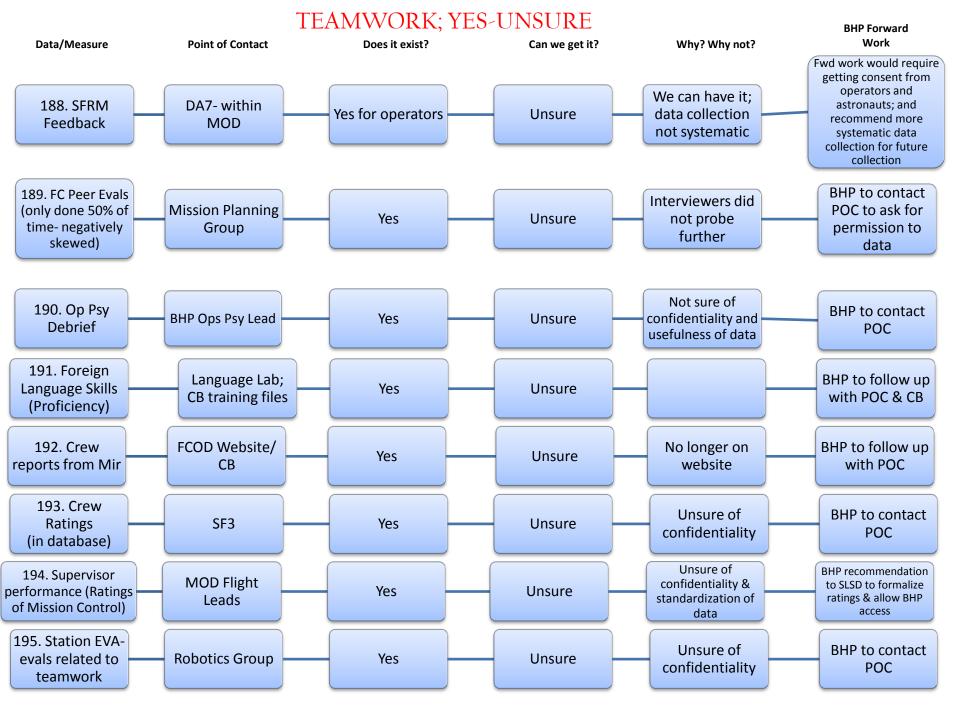
done currently

collection

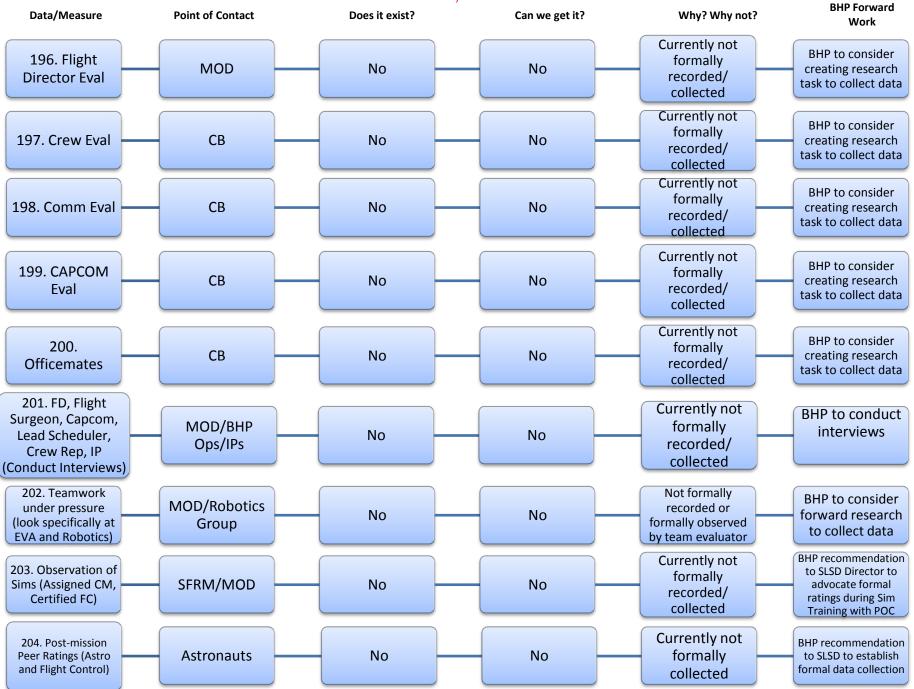


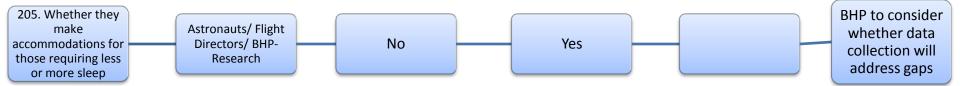
BHP Forward Does it exist? Why? Why not? Data/Measure **Point of Contact** Can we get it? Work 177. Narrative from the post flight **Oral History** BHP to consider High investment with Office/AstronautsCB/ crew presentation Yes Yes creating task with low yield; Filtered data PAO increase in resources at Space Center Houston 178. SFRM Case Studies Examples for SFRM WG Lead Yes Yes BHP to contact POC Flight Controllers 179. Management presentation about High investment with BHP will not pursue errors related to MOD Yes Yes low yield data at this time particular shuttle missions. 180. Summary factors from MODs debriefings of High investment with BHP will not pursue mission concerns **MOD** Management Yes Yes low yield data at this time and command errors from ground perspective 181. Frequency Audio/Visual POC; BHP to consider Limited resources and crew eats Flight Directors; Yes Yes creating task with low incidence rates Commander increase in resources together 182. Number and type of humorous interactions Audio/Visual POC; BHP to consider Limited resources and Flight Directors; among Yes Yes creating task with low incidence rates Commander increase in resources crewmembers (from different cultures)

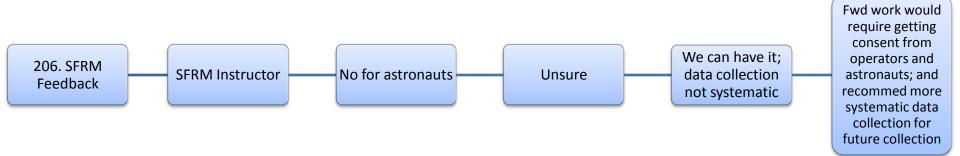
Data/Measure	Point of Contact	Does it exist?	Can we get it?	Why? Why not?	BHP Forward Work
183. Basic Training-NOLS	CB Office	Yes	No	CB rejected request (Data too weak to be beneficial)	BHP to make consideration for improved data collection
184. PPC Formpart of adaptation	Flight Surgeons & BHP Ops	Yes	No	Private Medical Information/ Data	Reconsent or alteration of current consent
185. CB Eval	CB Chief	Yes	No	Confidential data/Employee information	Request to SLSD to contact POC and collaborate to create new agreement
186. Quality of individual crew members (Selection Data)	BHP Ops	Yes	No	Private Medical Data; Employment Data. Exception: 2009 class was consented	BHP Research to contact POC to request 2009 data
187. Interpersonal issues w/ crewmember	BHP Ops/PPC contact/Flight Directors/Flight Surgeons	Yes	No	Private Medical Information/ Data	BHP to consider creating new data/task to address gaps



TEAMWORK; NO-NO

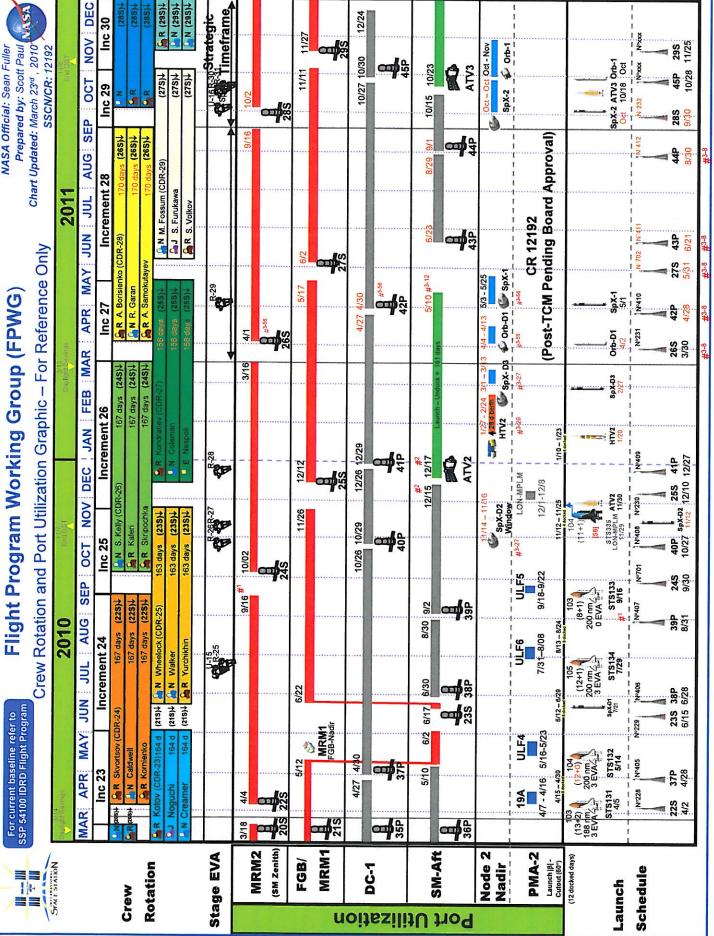






Appendix C: Examples of Data

MASA Prepared by: Scott Paul Chart Updated: March 23rd, 2010 NASA Official: Sean Fuller Flight Program Working Group (FPWG For current baseline refer to SSP 54100 IDRD Flight Program



Joint Shuttle-ISS Operational Flight Rules Annex

STS-130/20A ISS Expedition 22

Mission Operations Directorate

Final

December 7, 2009

Revision A

February 1, 2010

PCN-2

March 5, 2010



National Aeronautics and Space Administration

Lyndon B. Johnson Space Center Houston, Texas

	100
GENERAL, AUTHORITY, AND DEFINITIONS	1
FLIGHT OPERATIONS	2
GROUND INSTRUMENTATION	3
TRAJECTORY AND GUIDANCE	4
BOOSTER	5
PROPULSION	6
DATA SYSTEMS	7
GUIDANCE, NAVIGATION, AND CONTROL (GN&C)	8
ELECTRICAL	9
MECHANICAL	10
COMMUNICATIONS	11
ROBOTICS	12
AEROMEDICAL	13
SPACE ENVIRONMENT	14
EXTRAVEHICULAR ACTIVITY (EVA)	15
POSTLANDING	16
LIFE SUPPORT	17
THERMAL	18
PAYLOADS	19
ACRONYMS AND ABBREVIATIONS	Α
CHANGE CONTROL	В

FLIGHT RULES

PRIORITIES AND MISSION DURATION

20A_C2-11 ON-ORBIT PRIORITIES [RI] [C] [E] [J]

A. THE INTERNATIONAL SPACE STATION PROGRAM OFFICE AND SPACE SHUTTLE PROGRAM OFFICE HAVE AGREED ON THE FOLLOWING JOINT PRIORITIES:

MISSION PRIORITY	TASK	CAT
1.	DOCK SHUTTLE FLIGHT 20A TO PMA2 PORT AND PERFORM MANDATORY CREW SAFETY BRIEFING FOR ALL CREWMEMBERS.	1
2.	TRANSFER MANDATORY QUANTITIES OF WATER FROM ORBITER TO ISS PER FLIGHT 20A TRANSFER PRIORITY LIST (TPL).	1
3.	TRANSFER AND STOW CRITICAL ITEMS PER FLIGHT 20A TPL.	1
4.	INSTALL NODE 3 TO NODE 1 PORT CBM USING SSRMS. A. REMOVE NODE 3 STARBOARD PASSIVE COMMON BERTHING MECHANISM (PCBM) CONTAMINATION COVERS (EIGHT) AND INSPECT NODE 3 PCBM. B. DISCONNECT NODE 3 ORBITER SPACE STATION POWER DISTRIBUTION UNIT	1
	(SPDU)/LTA HEATER CABLES. C. OPEN NODE 1 PORT CBCS FLAP. D. PERFORM HIGH LEVEL INSPECTION OF NODE 1 PORT CBM.	
	E. REMOVE NODE 3 FROM ORBITER PLB AND INSTALL TO NODE 1 PORT CBM. F. REMOVE J612 (A/L SUPPLEMENTARY POWER) AND J602, AND CONNECT NODE 3 LTA HEATER CABLES TO NODE 1, AND ACTIVATE HEATERS (NOTE: THESE ARE NOT THE SAME LTA CABLES USED IN THE ORBITER).	
	G. INSTALL FOUR NODE 3 TRUNNION AND ONE KEEL PIN COVERS.	
5.	CONNECT NODE 3 INTERNAL AND EXTERNAL AVIONICS AND AMMONIA JUMPERS.	2
1	A. INSTALL 1553 BUS TERMINATOR (P104) ON NODE 3 (J104).	
	B. INSTALL THE P1-FGB AND P2-FGB TERMINATORS AND THERMAL BOOTIES.	
	C. INSTALL 8 ON-ORBIT INSTALLABLE HANDRAILS ON NODE 3.	
	D. COMPLETE NODE 1 TO NODE 3 VESTIBULE OUTFITTING.	
	(1) REMOVE FOUR NODE 1 PORT ACBM CONTROLLER ASSEMBLIES. (2) INSTALL SEVEN WIRE HARNESSES (1553A/STATION LAN, 1553B, MSS VIDEO, MSS BCP, UHF COAX, VIDEO/AUDIO BUS A, AUDIO BUS B.)	
	(3) INSTALL FUEL CELL (FC) WASTE WATER HOSE ASSEMBLY, AIR REVITALIZATION SYSTEM (ARS), MODERATE TEMPERATURE LOOP (MTL) SUPPLY, AND RETURN JUMPERS.	
	E. COMPLETE MATING OF NODE 1 RELOCATION MOD KIT HOSES/WIRE HARNESSES (1553A AND B, UHF COAX, 02 AND N2).	
	F. COMPLETE ROUTING AND MATE SO TO NODE 3 AVIONICS UMBILICALS (EIGHT CONNECTORS).	
@(DN 5 1	G. CONNECT/INSTALL U.S. LAB TO NODE 3 AMMONIA JUMPERS (FOUR) WITH THERMAL SHROUDS.	0004

®[DN 5

THIS RULE CONTINUED ON NEXT PAGE

FLIGHT RULES

20A_C2-11

ON-ORBIT PRIORITIES [RI] [C] [E] [J] (CONTINUED)

MISSION PRIORITY	TASK	CAT
6.	ACTIVATE AND CHECK OUT NODE 3.	
	A. ACTIVATE NODE 3 SYSTEMS.	2
	B. DEACTIVATE NODE 3 LTA HEATERS.	
	C. INGRESS NODE 3.	1
	D. INSTALL ONE PORTABLE FIRE EXTINGUISHER (PFE) AND TWO PORTABLE BREATHING APPARATUS (PBA) IN NODE 3.	
	E. ENABLE EMERGENCY LIGHTING POWER SUPPLY (ELPS)	
	F. INSTALL 02 AND N2 HOSE ASSEMBLIES IN NODE 1/NODE 3 VESTIBULE AND PURGE NODE 3 02 AND N2 LINES.	
	G. REMOVE NODE 3 STARBOARD NEGATIVE PRESSURE RELIEF VALVES (NPRV'S) (TWO) AND REPLACE WITH INTRA MODULE VENTILATIONS (IMV'S) (TWO).	
	 H. INSTALL NODE 1/NODE 3 IMV VESTIBULE JUMPERS AND SILENCERS (TWO). I. REMOVE STARBOARD POSITIVE PRESSURE RELIEF VALVE (PPRV) AND REPLACE WITH MANUAL PRESSURE EQUALIZATION VALVE (MPEV). 	
	J. INSTALL CAP ON AFT AND NADIR PPRV'S. K. INSPECT AFT NPRVS.	
7.	RELOCATE CUPOLA FROM NODE 3 PORT CBM AND INSTALL ON NODE 3 NADIR	2
	CBM. A. OPEN NODE 3 PORT HATCH AND INSTALL IMV CAPS ON INTERNAL AND EXTERNAL NODE 3 PORT AFT IMV INTERFACE.	_
	B. INSTALL NODE 3 AXIAL ACBM CENTER COVER.	
	C. INSTALL CENTERLINE BERTHING CAMERA SYSTEM (CBCS) IN NODE 3 NADIR CBM.	
	D. OPEN NODE 3 NADIR ACBM CENTER DISK COVER FLAP.	
	E. CLOSE NODE 3 PORT HATCH AND DEPRESSURIZE CUPOLA.	
=	F. RELEASE NODE 3 NADIR ACBM PETAL RESTRAINTS AND HATCH LATCH PINS.	
	G. PERFORM HIGH LEVEL INSPECTION OF NODE 3 NADIR CRM	
	H. REMOVE CUPOLA FROM NODE 3 PORT CBM AND INSTALL ON NODE 3 NADIR CBM USING SSRMS.	
8.	ACTIVATE AND CHECK OUT THE CUPOLA.	2
	A. PRESSURIZE CUPOLA AND OPEN NODE 3 NADIR HATCH.	2
8	3. REMOVE FOUR NODE 3 NADIR ACBM CONTROLLER ASSEMBLIES	
19	3. REMOVE CUPOLA PCBM MLI AND CBCS TARGETS.	
Į.	D. RECONFIGURE CUPOLA CORNER PANELS FROM LAUNCH TO ON-ORBIT CONFIGURATION.	
1.	E. CONNECT CUPOLA UTILITIES (THERMAL CONTROL SYSTEM (TCS), ELECTRICAL POWER SYSTEM (EPS), AND AVIONICS JUMPERS).	
	ACTIVATE CUPOLA HEATERS.	
	6. FILL NODE 3/CUPOLA INTERNAL THERMAL CONTROL SYSTEM (ITCS) LINES AND CONFIGURE NODE 3 ITCS LINES TO SUPPORT CUPOLA.	i i

THIS RULE CONTINUED ON NEXT PAGE

FLIGHT RULES

20A_C2-11 ON-ORBIT PRIORITIES [RI] [C] [E] [J] (CONTINUED)

MISSION PRIORITY	TASK	CAT
9.	TRANSFER REMAINING CARGO ITEMS PER FLIGHT 20A TPL. A. ACTIVATE AND CHECK OUT COMPOUND SPECIFIC ANALYZERS- COMBUSTION PRODUCTS (CSA-CP)	2
10.	B. INSTALL AND RETURN RADIATION AREA MONITORS (RAM'S). PERFORM DAILY ISS PAYLOAD STATUS CHECKS AS REQUIRED PER SSP 54021 54022-ANX 5.	3
11.	THE FOLLOWING TASKS ARE DEEMED TO FIT WITHIN THE EXISTING EVA TIMELINES; HOWEVER, MAY BE DEFERRED IF THE EVA IS BEHIND SCHEDULE. THE EVA WILL NOT BE EXTENDED TO COMPLETE THESE TASKS. A. DEPLOY NODE 3 AXIAL ACBM CORNER DEBRIS SHIELDS (FOUR) AND	3
	CONFIGURE FOR PERMANENT INSTALLATION. B. REMOVE NODE 3 AXIAL PORT CORNER DEBRIS SHIELD LAUNCH RESTRAINTS (EIGHT) FROM NODE 3 STOVEPIPE. C. REMOVE CUPOLA THERMAL COVER. D. RELEASE CUPOLA SHUTTER LAUNCH LOCKS. E. REMOVE SPDM ORU TEMPORARY PLATFORM (OTP) IN PREPARATION FOR	
	ULF4. F. INSTALL NODE 3 ACS NON PROPULSIVE VENT. G. CONNECT PMA 3 UMBILICALS TO PROVIDE ADDITIONAL STOWAGE. H. DISCONNECT NODE 3 LTA CABLE FROM NODE 1 AND RECONNECT THE A/L SUPPLEMENTARY POWER (J612 CONNECTOR) AFTER NODE 3 ACTIVATION. I. INSTALL NODE 3 WORKSITE INTERFACES (THREE) AND REMAINING EVA HANDRAILS (SIX).	
	J. INSTALL GAP SPANNERS (EIGHT) TO PROVIDE TRANSLATION PATHS BETWEEN NODE 1 AND NODE 3, AND U.S. LAB AND NODE 3 HANDRAILS. K. DEPLOY S3 LOWER INBOARD PAS (FOR FLIGHT ULF5).	
12.	PERFORM DAILY MIDDECK ACTIVITIES TO SUPPORT PAYLOADS (INCLUDES CASES WHERE SHUTTLE CREW ALSO PERFORMS PAYLOAD ACTIVITIES ON THE ISS) PER SSP 54021_54022-ANX 5.	3.
13.	TRANSFER, INSTALL, ACTIVATE, AND CHECK OUT THE FOLLOWING NODE 3 RACKS: A. ARED FROM NODE 102 TO NODE 302 B. WATER RECOVERY SYSTEM (1) WRS # 1 FROM LAB1D4 TO NOD3D5 a. REMOVE CARGO FROM NODE 3 INTEGRATED STOWAGE PLATFORMS (ISP'S). b. REMOVE NODE 3 ISP AND STOW IN LAB1P2. (2) WRS #2 FROM LAB1P4 TO NOD3D4 a. REMOVE CARGO FROM NODE 3 ISP. b. REMOVE NODE 3 ISP AND STOW IN LAB1P1. c. TEMPORARILY MOUNT AND GROUND TOTAL ORGANIC CARBON ANALYZER (TOCA) IF NOT TRANSFERRED TO NODE 3. (3) WASTE AND HYGIENE COMPARTMENT (WHC) FROM LAB1P2 TO NOD3F4 REQUIRES NODE 3 FUEL CELL WATER BUS FILL AND CONNECT TO ISS BUS IN NODE 1	3
	C. AIR REVITALIZATION SYSTEM (ARS) FROM JPM102 TO NOD3A4 D. OXYGEN GENERATION SYSTEM (OGS) FROM THE U.S. LAB1P1 TO NODE 3A5	

®[DN 5]

THIS RULE CONTINUED ON NEXT PAGE

STS-130/20A ISS EXPEDITION 22 02/01/10

FINAL, REV A

FLIGHT OPERATIONS

2-105

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FLIGHT RULES

20A_C2-11 ON-ORBIT PRIORITIES [RI] [C] [E] [J] (CONTINUED)

MISSION		
PRIORIT	Y	CAT
14.	PERFORM ISS PAYLOAD DEGELER	J CAI
15.	PERFORM ISS PAYLOAD RESEARCH OPERATIONS TASKS.	+
		3
	ATTACHMENT REPLACEMENTS (K-BARS) AND PIVOT FITTINGS ON AVIONICAL	3
	B. DEPLOY STATION SUPPORT COMPUTER (SSC) (ONE) IN NODE 3 (INCLUDES C. REMOVE CLOSEOUT PANEL LAUNOUS ROLLS.	
	C. REMOVE CLOSEOUT PANEL LAUNCH BOLTS (> 700 BOLTS) AND LAUNCH D. INSTALL HATCH LATCH MANDERS	
	D. INSTALL HATCH LATCH HANDLE GUIDE ASSEMBLIES (TWO) ON NODE 3 E. REMOVE NODE 3 COMMISSIONERS	
	E. REMOVE NODE 3 COMMON CABIN AIR ASSEMBLY (CCAA) ANTI-VIBRATION F. REMOVE MTI AND LOWER TO THE REMOVE MTI AND LO	
	AVM LAUNCH BRACKETS	
	G. INSTALL ITCS SAMPLE TOOLS (TWO) IN NODE 3 STARBOARD ENDCONE, PERFORM SAMPLING, AND RETURN SAMPLE FOR GROUND ASSESSMENT.	
	SUPPORT A/L MTI	
16.	I. OPEN NODE 3 STARBOARD ARS MANUAL VALVE.	
70.	- " OTHIN COPOLA CILI FILTING TACKO	
	In SET UP RUBUTICS MODICETATION	3
	ID. INSTALL CUPOLA AUDIO TERMINA	
	B. INSTALL CUPOLA AUDIO TERMINAL UNIT (ATU), UTILITY OUTLET PANELS (UOP) (TWO), SUN VISORS (TWO), AND CREW RESTRAINTS.	
	C. CONFIGURE CUPOLA PANELS IN THE STATISTICS.	
	D. INSTALL, ACTIVATE, AND CHECK OUT THE BOARD	
17.	D. INSTALL, ACTIVATE, AND CHECK OUT THE ROBOTICS WORKSTATION (RWS).	
	PRESSURE GAS TANK (IDOS	
	WITH THE PLAN TO HAVE ISS AIRLOCK (ALL) TANKS	3
	TETICENENI.	
18.	TRANSFER NITROCEN (NO. 77	
1.	TRANSFER NITROGEN (N2) FROM THE ORBITER TO THE ISS AIRLOCK HIGH PRESSURE GAS TANK (HPGT). REQUIRED QUANTITIES SHALL BE CONSISTENT RETIDEMENT.	3
	WITH THE PLAN TO HAVE ISS AIRLOCK (A/L) TANKS FULL AT SHUTTLE	ა
	ALTIKEMENT.	
19.	PERFORM REMAINING NODE 3 AND CUPOLA OUTFITTING TASKS.	
20. F	PERFORM PROGRAM-APPROVED EVA GET-AHEAD TASKS. EVA GET-AHEAD TASKS DO NOT FIT IN THE FXISTING EVA TIME HAVE	4
Į.	EVA GET-AHEAD TASKS DO NOT FIT IN THE EXISTING EVA TIMELINES;	4
		4
10	DHOULD THE ODDODE IN US AND KEADY TO DEDECOR.	
10	ELECT THE TASKS TO BE COMPLETED BASED ON EFFICIENCIES GAINED IN	
15	ERFORMING THE ALREADY SCHEDULED REQUIRED TASKS:	
IR	EMOVE THE D1 CCD AND D-	
lM	EMOVE THE P1-FGB AND P2-FGB TERMINATORS AND THERMAL BOOTIES AND THE NODE 2 STARRED DATA LINES TO THE J1FGB AND 12FGB CONNECTES AND	
	HE NODE 3 STARBOARD STANCHION.	
5 1	TAILED TAILCHION.	

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FLIGHT RULES

20A_C2-11 ON-ORBIT PRIORITIES [RI] [C] [E] [J] (CONTINUED)

MISSION PRIORITY	TASK	CAT
21.	REBOOST THE ISS WITH THE ORBITER IF MISSION RESOURCES ALLOW AND ARE CONSISTENT WITH ISS TRAJECTORY ANALYSIS AND PLANNING.	4
22.	PERFORM IMAGERY SURVEY OF THE ISS EXTERIOR DURING ORBITER FLYAROUND AFTER UNDOCK.	4
23.	PERFORM (PAYLOADS OF OPPORTUNITY) - (NOT REQUIRED DURING DOCKED OPS) IF PROPELLANT AVAILABLE. A. RAM BURN OBSERVATIONS-2 (RAMBO-2) B. MAUI ANALYSIS OF UPPER ATMOSPHERIC INJECTIONS (MAUI) C. SHUTTLE EXHAUST ION TURBULENCE EXPERIMENTS (SEITE) D. SHUTTLE IONOSPHERIC MODIFICATION WITH PULSED LOCAL EXHAUST (SIMPLEX)	4
24.	TRANSFER TOCA FROM LAB1P4 TO NOD3D5.	4
25.	INSTALL HAM RADIO IN COLUMBUS TO ESTABLISH AN OPERATIONAL CAPABILITY IN THE USOS.	4
26.	PERFORM PROGRAM-APPROVED IVA GET-AHEAD TASKS. THE FOLLOWING IVA GET-AHEAD TASKS DO NOT FIT IN THE EXISTING IVA TIMELINES; HOWEVER, THE INCREMENT CREW WILL HAVE THE OPTION TO PERFORM THEM SHOULD THE OPPORTUNITY ARISE. A. UNPACK 20A MIDDECK CARGO. B. REMOVE CARGO FROM NOD3F5 ISP, DISASSEMBLE AND TEMPORARY STOW ISP IN TBD LOCATION.	4
27.	PERFORM SDTO 13005-U, ISS STRUCTURAL LIFE VALIDATION AND EXTENSION, DURING NODE 3/CUPOLA BERTHING (IWIS REQUIRED).	4
28.	PERFORM SDTO 13005-U, ISS STRUCTURAL LIFE VALIDATION AND EXTENSION, DURING SHUTTLE MATED REBOOST (IWIS REQUIRED).	4
29.	PERFORM SDTO 13005-U, ISS STRUCTURAL LIFE VALIDATION AND EXTENSION, DURING 20A ORBITER UNDOCKING (IWIS HIGHLY DESIRED, BUT NOT REQUIRED).	4

®[DN 5]

B. THE MISSION WILL BE EXECUTED PER THE PRIORITIES IN PARAGRAPH A UNLESS OTHERWISE DIRECTED VIA CHIT.

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FLIGHT RULES

20A C2-15 MINIMUM DURATION FLIGHT [RI]

FOR ORBITER FAILURES REQUIRING A MINIMUM DURATION FLIGHT (MDF), THE MISSION MANAGEMENT TEAM (MMT) WILL DETERMINE FLIGHT DURATION BASED ON THE SEVERITY OF THE FAILURE AND WITHIN THE GENERAL CONSTRAINTS DEFINED IN RULE {20A_C2-11}, ON-ORBIT PRIORITIES. FOR STS-130/20A, THE INITIAL MDF PLAN AND ADDITIONAL CONSIDERATIONS TO BE EVALUATED BY THE MMT ARE AS FOLLOWS (ASSUMES FD3 RENDEZVOUS): @[DN 37]

A. LAUNCH; FD02 OBSS SURVEY; RENDEZVOUS/DOCK; NODE3/CUPOLA INSTALLATION/EVA1 AND ATTACH LTA CABLES; CREW OFF-DUTY; UNDOCKING/POST-UNDOCK INSPECTION; ENTRY/LANDING PREP; AND ENTRY/LANDING (7-DAY MISSION)

A 7-day mission (landing on FD8) is required in order to accomplish all category 1 objectives.

B. ADDITIONAL DOCKED DAYS TO ACCOMPLISH LOWER-PRIORITY MISSION OBJECTIVES MAY BE CONSIDERED BY THE MMT.

Lower-priority objectives (category 2 and below) may be considered by the MMT, balancing additional docked days for mission success with the risk of remaining on-orbit. The associated risk trades will be heavily dependent on the specific failure(s) driving the MDF situation.

®[DN 37]

STS-130/20A ISS EXPEDITION 22

Flight Plan

STS-130/20A

(FDO 12+1+2 FRR Trajectory)

Mission Operations Directorate Operations Division

Final December 18, 2009

Launch Date: Thursday, February 4, 2010

Launch Time: 035/10:45:04 GMT

February 4, 04:45:04 EDT

For the latest working copy of the Flight Plan, visit http://modspops.jsc.nasa.gov/mod/DO/DO4/Joint/130_20A/default.aspx

National Aeronautics and Space Administration

Lyndon B. Johnson Space Center Houston, Texas



MISSION OPERATIONS DIRECTORATE

FLIGHT PLAN STS-130

FINAL December 18, 2009

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FLIGHT PLAN STS-130

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^{*} – Omit from flight book

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OVERVIEW TIMELINE

STS-130/20A Overview Timeline 13+1+2 (3 EVAs) GMTLO 035/10:45:04 Feb 4th, 2010

WILL UUU 1 2 3 4 5 6 7 8 9 10 11
STS ASC PI PTW & RMS PGSC C/O
22V+YW NC1 -2LV -XVV NC1 03:35
GMT 23 38/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 MET 12 13 14 15 16 17 18 19 20 21 22 23 01/0 1 2 3 4 5 6 7 8 9 10 11
STS NC2 Inspections Meal Inspections & Docking Prep
4NC2 0/17:03 4NC3 1/02:02
GMT 23 37/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 MET 12 13 14 15 16 17 18 19 20 21 22 23 02/0 1 2 3 4 5 6 7 8 9 10 11
STS RNDZ Dock \$\frac{1}{2} \frac{1}{2} \fr
Orb. Alt -ZLV-XVV -ZLV+YVV RNDZ LVLH TEA WS4/Node 2 LVLH TEA LVLH TEA WS4/Node 2 LVLH TEA LVLH
Simo Dump ² NH 16:13 ² NK4 16:49 ^Ti 18:21
STS Middeck Xfer PA Meal OFF DUTY (4 bp.) EVA 1 Campoid
SS
The state of the s
MET 12 13 14 15 16 17 18 19 20 21 22 23 04/0 1 2 3 4 5 6 7 8 9 10 11
O ISS D Transfer Node 3 Install & O IP Pod EVA
MT/SSRMS WS4Node 2 *Node 3 Leak Check
GMT 23 40/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 MET 12 13 14 15 16 17 18 19 20 21 22 23 05/0 1 2 3 4 5 6 7 8 9 10 11
STS
Orb Att
^ Node3 Eady Ingress GMT 23 41/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22
MET 12 13 14 15 16 17 18 19 20 21 22 23 06/0 1 2 3 4 5 6 7 8 9 10 11 STS Pre EVA EVA 2 (Node 3 External Outfitting) Post EVA
ISS D Node 3 Outfit & Cupola Prep Meal Cupola Prep & Depress D UVLH TEA
MT/SSRMS
GMT 23 42/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 MET 12 13 14 15 16 17 18 19 20 21 22 23 07/0 1 2 3 4 5 6 7 8 9 10 11
STS Cupola Reloc, Press, Lk Ck ISS D Rack Xfer Meal PA Cupola Outfitting PA O Rack Xfer & EVA Prep O E
□ Orb Att LVLH TEA H≥O Dump LVLH TEA MT/SSRMS WS4/Lab
Cupola Leak Check ^ Supply Dump ^ Cupola Fine Leak Check
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 MET 12 13 14 15 16 17 18 19 20 21 22 23 08/0 1 2 3 4 5 6 7 8 9 10 11 STS Node 3 & Cupola Outfitting Node 3 & Eval OFF DUTY (3.5 hrs) & Eval Campout
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 MET 12 13 14 15 16 17 18 19 20 21 22 23 08/0 1 2 3 4 5 6 7 8 9 10 11 STS Node 3 & Cupola Outfitting Meal OFF DUTY (3.5 hrs) & EVA Rww D Orb Att LVLH TEA
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 MET 12 13 14 15 16 17 18 19 20 21 22 23 08/0 1 2 3 4 5 6 7 8 9 10 11 STS
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 MET 12 13 14 15 16 17 18 19 20 21 22 23 08/0 1 2 3 4 5 6 7 8 9 10 11 STS Nove 3 & Cupola Outfitting Meal OFF DUTY (3.5 hrs) & EVAL FROM DITY Orb Alt WS4/PDGF1 GMT 23 44/0 1 2 3 4 5 8 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 MET 12 13 14 15 16 17 18 19 20 21 22 23 09/0 1 2 3 4 5 6 7 8 9 10 11
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 MET 12 13 14 15 16 17 18 19 20 21 22 23 08/0 1 2 3 4 5 6 7 8 9 10 11 STS
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 MET 12 13 14 15 16 17 18 19 20 21 22 23 08/0 1 2 3 4 5 6 7 8 9 10 11 STS Node 3 & Cupola Outfitting Meal OFF DUTY (3.5 hrs) & EVA3 Carroout OTH DAIL WS4/PDGF1 GMT 23 44/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 GMT 23 44/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 STS Pre EVA EVA3 (Node 3, Cupola & PMA Tasks) Post EVA STS Pre EVA EVA3 (Node 3, Cupola & PMA Tasks) Post EVA OFF DUTY (3.5 hrs) & EVA3 Carroout EVLH TEA WS4/PDGF1
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 STS
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 STS
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 STS
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 STS
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22
GMT 23 43/0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 STS
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13. ABSTRACT (Maximum 200 words) This report is the result of a collaborative effort between NASA's Behavioral Health & Performance (BHP) Research and Operations Group to investigate and determine the availability of data pertaining to behavioral performance (and other pertinent variables) that have been collected by the laboratories at NASA's Johnson Space Center. BHP's Operations and Research groups collaborated to systematically identify what types of performance data are needed in relevant BHP performance domains and also to conduct structured interviews with NASA personnel to identify which data do or do not exist currently (and for instances where such data exist, to evaluate the type, quality, accessibility, and confidentiality of those data). The authors defined outcome categories of performance that encapsulate BHP performance domains, mapped BHP Research Risks and Gaps onto those performance outcome categories, and identified and prioritized indicators for each outcome category. The team identified key points of contact (subject matter experts [SMEs]) as potential interviewes, created a template for structured interview questions about sources and accessibility of performance data, and coordinated and conducted structured interviews with the SMEs. The methodology, results, and implications of this effort, as well as forward work needed, are discussed in this report.						
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