

## CARES Domains of Organizational Culture

Factor	Item
Learning & Problem Solving	We are encouraged to use creative problem solving to address racial inequities in sepsis care.
	There is seamless coordination among the different organizations involved with the care of patients with sepsis (e.g., primary care, hospitals, rehabilitation facilities, social services).
	We provide evidence-based care equitably to patients with sepsis.
	We use multiple kinds of data to reduce racial inequities in sepsis care and outcomes.
	We interact with outside organizations to learn new ways of reducing racial inequities in sepsis care and outcomes (e.g., other health systems, national organizations).
	We are continuously improving sepsis care and outcomes.
	We resist new approaches to address racial inequities in sepsis care and outcomes.
	We are open to new ideas about the care of patients with sepsis.
	We make time to review our progress in working to improve sepsis care and outcomes.
	Someone makes sure that we stop to reflect on our work process.
System Pressur	People providing care for patients with sepsis are overly stressed.
	The time constraints get in the way of providers doing a good job.
	People are too busy to invest time for targeted improvement of sepsis care.
	There is simply no time for reflection in this work environment.
Psychological Safety	If we make a mistake, it is often held against us.
	We are able to bring up problems and tough issues.
	We reject others for being different.
	It is safe to take a risk in our work.
	It is difficult to ask others for help.
	Colleagues deliberately act in a way that undermines our efforts.
Planning Processes	People's unique skills and talents are valued and utilized.
	We take strategic approaches to reduce racial inequities in sepsis care and outcomes.
	We utilize goals and metrics to reduce racial inequities in sepsis care and outcomes.
	We ensure processes for management and coordination are in place to support our work to reduce racial inequities in sepsis care and outcomes.
	We collaborate within our organization and with different organizations to reduce racial inequities in sepsis care and outcomes.
	Collaborators from different organizations and roles pay attention to the relationships needed for our work to reduce racial inequities in sepsis care and outcomes.
Leadership Support	Senior leaders have prioritized reducing racial inequities in sepsis care and outcomes.
	Senior leaders have indicated that racial inequities in sepsis care and outcomes can be improved.
	Senior leaders have encouraged changes in practices to reduce racial inequities in sepsis care and outcomes.
	We have adequate financial resources for personnel and equipment to reduce racial inequities in sepsis care and outcomes.