

**Patient Safety Culture Survey for Ambulatory Surgical Centers Guide and Data File Specifications**

**AHCA**  
**Patient Safety Culture Survey for Ambulatory**  
**Surgical Centers**  
**Guide and**  
**Data File Specifications**

## AHCA Patient Safety Culture Survey for Ambulatory Surgical Centers Guide and Data File Specifications

These specifications are for preparing your respondent-level data from the Patient Safety Culture Survey for Ambulatory Surgical Centers, AHCA Form 3130-XXXX, \_\_\_\_\_. The instructions and data file specifications provide guidance as to how to conduct the survey and prepare your CSV data file for submission to AHCA's Patient Safety Culture Survey (PSCS) System.

This survey is intended to be taken **anonymously**. Respondents will not be linked to individual survey responses by any specific identifier to encourage candidness. Instead, a unique ID must be assigned to each individual survey response, e.g. 001,002,003.

### **INSTRUCTIONS:**

**Step 1:** Decide whether the survey will be administered by facility personnel or a contracted vendor, or a combination of the two.

**Step 2:** Decide whether an electronic survey or paper survey will be administered. AHCA Form 3130-XXXX, \_\_\_\_\_ is available at Landing Page site.

#### **For electronic surveys:**

Vendors may also design or utilize a program to handle some or all of your data collection, analysis, and report preparation.

#### **For paper surveys:**

Paper surveys may be distributed through the facility's internal mail system or by the designated point of contact (POC). They may also be returned through the internal mail system or drop-boxes.

**Step 3:** Submit survey response data using the PSCS Data Entry Tool for ASCs, available at Landing Page site.

**Step 4:** Administering the survey in its entirety without modifying or deleting items.

**Step 5:** Register into the PSCS System to complete successful submission of your facility's survey data CSV file.

## Patient Safety Culture Survey for Ambulatory Surgical Centers Survey on Data File

| Record Identifier           | Variable Name | Response Values  |
|-----------------------------|---------------|--|
| Site ID                     | SITEID        | If you are submitting data for multiple ASCs, then each site should have a unique Site ID. If you have data for only one ASC, then its Site ID can be 1. |
| Individual Unique Record ID | UNIQUEID      | Each individual record in the dataset should have a unique ID, (e.g., 001, 002, 003)   |

### **SECTION A: Working in This Facility**

| Survey Question   | Variable Name | Response Values   |
|---|---------------|---|
| 1. Important patient care information is clearly communicated across areas in this facility | A1            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |
| 2. We feel comfortable asking questions when something doesn't seem right                   | A2            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |
| 3. We have enough staff to handle the workload  | A3            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |
| 4. When we see someone with more authority doing something unsafe for patients, we speak up | A4            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |

**Patient Safety Culture Survey for Ambulatory Surgical Centers Survey on Data File**

| Survey Question   | Variable Name | Response Values   |
|---|---------------|---|
| 5. Key information about patients is missing when it is needed                                | A5            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |
| 6. Our ideas and suggestions are valued in this facility                                      | A6            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |
| 7. We share key information about patients as soon as it becomes available                    | A7            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |
| 8. There is enough time between procedures to properly prepare for the next one               | A8            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |
| 9. Within this facility, we do a good job communicating information that affects patient care | A9            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |
| 10. We feel rushed when taking care of patients   | A10           | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |

## Patient Safety Culture Survey for Ambulatory Surgical Centers Survey on Data File

### **SECTION B: Teamwork and Training**

| Survey Question   | Variable Name | Response Values   |
|---|---------------|---|
| 1. When someone in this facility gets really busy, others help out              | B1            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |
| 2. Staff who are new to this facility receive adequate orientation              | B2            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |
| 3. Staff feel pressured to do tasks they haven't been trained to do             | B3            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |
| 4. Doctors and staff clearly understand each other's roles and responsibilities | B4            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |
| 5. We get the on-the-job training we need in this facility                      | B5            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |
| 6. Our facility allows disrespectful behavior by those working here             | B6            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |

**Patient Safety Culture Survey for Ambulatory Surgical Centers Survey on Data File**

| Survey Question                               | Variable Name | Response Values   |
|---|---------------|---|
| 7. Staff get the refresher training they need | B7            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |
| 8. We work together as an effective team      | B8            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |

**SECTION C: Organizational Learning/Response to Mistakes**

| Survey Question   | Variable Name | Response Values   |
|---|---------------|---|
| 1. This facility actively looks for ways to improve patient safety      | C1            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |
| 2. Staff are treated fairly when they make mistakes                     | C2            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |
| 3. We make improvements when someone points out patient safety problems | C3            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |

**Patient Safety Culture Survey for Ambulatory Surgical Centers Survey on Data File**

| Survey Question   | Variable Name | Response Values   |
|---|---------------|---|
| 4. Learning, rather than blame, is emphasized when mistakes are made                                  | C4            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |
| 5. Staff are told about patient safety problems that happen in this facility                          | C5            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |
| 6. We are good at changing processes to make sure the same patient safety problems don't happen again | C6            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing |

**SECTION D: Near-Miss Documentation**

| Survey Question  | Variable Name | Response Values   |
|--|---------------|---|
| 1. When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? | D1            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |

**SECTION E: Management Support for Patient Safety**

| Survey Question  | Variable Name | Response Values   |
|--|---------------|---|
| 1. Managers encourage everyone to suggest ways to improve patient safety | E1            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing or properly skipped |

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| Survey Question   | Variable Name | Response Values   |
|---|---------------|---|
| 2. Management examines near-miss events that could have harmed patients but did not |               | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing or properly skipped |
| 3. Management provides adequate resources to improve patient safety                 | E3            | 1 = Strongly disagree<br>2 = Disagree<br>3 = Neither agree nor disagree<br>4 = Agree<br>5 = Strongly agree<br>9 = Does not apply or Don't know<br>blank = Missing or properly skipped |

### **SECTION F: Overall Rating**

| Survey Question   | Variable Name | Response Values   |
|---|---------------|---|
| 1. Please give your facility an overall rating on patient safety. | F1            | 1 = Poor<br>2 = Fair<br>3 = Good<br>4 = Very good<br>5 = Excellent<br>blank = Missing |

### **SECTION G: Communication in the Surgery/Procedure Room**

| Survey Question   | Variable Name | Response Values   |
|---|---------------|---|
| A. Are you typically in the surgery/procedure room during surgeries, procedures, or treatments?                     | GA            | 1 = Yes<br>2 = No<br>blank = Missing  |
| 1. Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done | G1            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |



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| Survey Question   | Variable Name | Response Values   |
|---|---------------|---|
| 2. Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns | G2            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |
| 3. Immediately after procedures, team members discussed any concerns for patient recovery                                       | G3            | 1 = Never<br>2 = Rarely<br>3 = Sometimes<br>4 = Most of the time<br>5 = Always<br>9 = Does not apply or Don't know<br>blank = Missing |

### **SECTION H: Background Questions**

| Survey Question   | Variable Name | Response Values  |
|---|---------------|--|
| 1. What is your position in this facility? Check <u>ONE</u> category that best applies to your job. | H1            | a = Anesthesiologist<br>b = Doctor/Physician (excluding Anesthesiologists) or Surgeon<br>c = Certified Registered Nurse Anesthetist (CRNA)<br>d = Physician Assistant or Nurse Practitioner<br>e = Management<br>f = Nurse<br>g = Technician<br>h = Other Clinical Staff or Clinical Support Staff<br>i = Administrative, Clerical, or Business Staff<br>j = Other Position<br>blank = Missing |
| <b>TEXT FOR OTHER, SPECIFY</b>  |               |  |
| 2. Typically, how many hours per week do you work in this facility?                                 | H2            | a = 1 to 16 hours per week<br>b = 17 to 31 hours per week<br>c = 32 to 40 hours per week<br>d = More than 40 hours per week<br>blank = Missing   |
| <b>TEXT FOR YOUR COMMENTS</b>   |               |  |

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### **SECTION J: Care**

In general, what is the likelihood that you would seek care for yourself or for your family at this Facility?

Very Unlikely  
1

Unlikely  
2

Somewhat Likely  
3

Likely  
4

Very Likely  
5

This guide was derived from the Agency for Healthcare Research and Quality's (AHRQ), Ambulatory Surgery Center Survey on Patient Safety Culture: User's Guide.

AHRQ is the lead Federal agency charged with supporting research designed to improve the quality of health care, reduce its cost, address patient safety and medical errors, and broaden access to essential services. AHRQ sponsors and conducts research that provides evidence-based information on health care outcomes; quality; and cost, use, and access. The information helps health care decision makers – patients and clinicians, health system leaders, and policymakers – make more informed decisions and improve the quality of health care services.

Smith S, Sorra J, Franklin M, et al. Ambulatory Surgery Center Survey on Patient Safety Culture: User's Guide. (Prepared by Westat, Rockville, MD, under Contract No. HHSA2902010000251.) Rockville, MD: Agency for Healthcare Research and Quality; July 2018. AHRQ Publication No. 18-0040-EF (Replaces 15-0019-EF).

<http://www.ahrq.gov/professionals/quality-patient-safety/patientsafetyculture/hospital/index.html>