

#### **Best Practices for Administering SOPS Surveys**

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# Selecting a SOPS Survey or Item Set



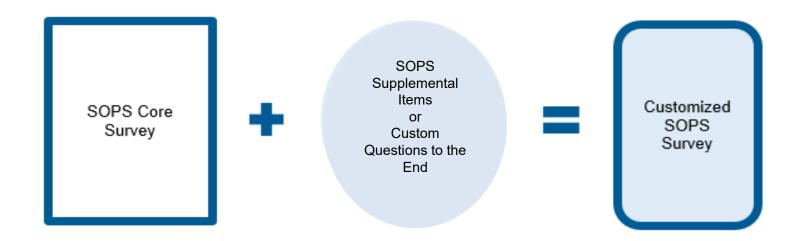


	SOPS Surveys		SOPS Supplemental Item Sets			
			Health Information Technology (IT)	Workplace Safety	Value and Efficiency	Diagnostic Safety
		Hospital	<b>✓</b>	✓	✓	
		Medical Office Version 2.0 under development		Under development	✓	✓
		Nursing Home Version 2.0 under development		✓		
		Ambulatory Surgery Center				
	R <sub>k</sub>	Community Pharmacy				

#### **Customizing Your Survey**



- SOPS supplemental item sets or customized questions should be added to the end of the survey, just before the background questions
- You can modify the work areas or staff positions as appropriate
  - Crosswalk back to the survey categories when submitting to the SOPS Databases
- Develop your final, customized SOPS Survey

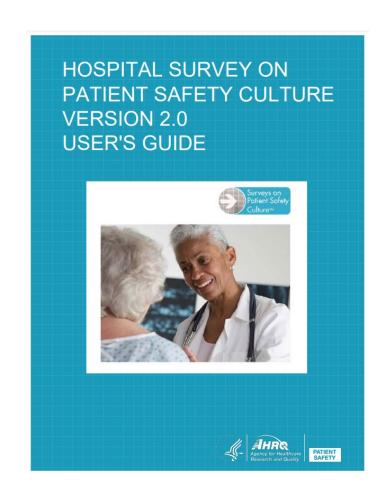


#### **Survey Administration Guidelines**



#### **SOPS Survey User's Guides**

- Selecting your survey population
- Administering the survey
- Analyzing the data
  - Calculating response rates
  - Calculating scores on composite measures and items
  - Analyzing open-ended comments





## **Selecting Your Survey Population**

# Decision: Who Should You Survey?



- ► Full-time, part-time staff, temporary or float staff
- ► Those working for a least 6 months in your organization
- ▶ Physicians—including residents
- Temporary staff, contractors or volunteers
  - Do they know day-to-day activities?
  - Do they interact regularly with providers and/or staff?
- Atypical non-clinical areas: academic faculty, health plan employees, etc.
  - If the survey does not apply to an area, don't administer the survey in that area





# Decision: Survey Everyone or Select a Sample?



#### Census:

- Most healthcare organizations administer the survey to all providers and staff in all units/work areas
  - Raises awareness about patient safety
  - Makes sure everyone's voice is heard
- If a small site, a census of your organization should be conducted

#### Sample:

- Can be conducted with large sites to help reduce burden on staff and resources, particularly for paper surveys
- ➤ To evaluate the impact of a patient safety initiative, conduct pre- and postsurveys with those involved in the initiative



# **Administering the Survey**

# Decision: Conduct the survey in-house or hire a vendor?



- In-house considerations
  - Need the staff and resources to administer the survey, analyze the results and distribute survey results
  - Administer a complete SOPS trademarked survey without edits or deletions to submit to the SOPS Databases
- Vendor considerations
  - Staff may feel more comfortable that their responses are confidential
  - Have experience conducting analyses and providing reports of results
  - Can sometimes do it faster, with higher data quality
  - Can provide vendors with your requirements and request bids
    - Ensure they use the complete SOPS trademarked survey without edits or deletions
    - Ensure they can accommodate custom requests

# Decision: A Confidential or Anonymous Survey?



Confidential – respondents can be identified by the vendor or survey administrator, but assurances and processes are in place to ensure that **identifiable data or results will not be released** 

Anonymous – respondents cannot be identified

	Confidential Survey	Anonymous Survey		
•	Can track individual respondents to only send reminders to non-respondents	<ul> <li>Unable to track respondents so send thank you/reminders to all</li> </ul>		
•	Can analyze results by the administrative data that is available			
•	Staff may not feel comfortable completing the survey if their responses can be identified	<ul> <li>Staff may feel more comfortable if their responses cannot be identified</li> </ul>		

# Decision: Survey Mode — Web, Paper or a Combination?



- Advantages of web surveys:
  - ► Easier logistics—no need to print, assemble, distribute, and collect
  - Responses are electronic—no need for manual data entry
  - Data cleaning is minimized because only valid answers are allowed
  - ► Faster timeline
- Considerations:
  - ▶ Does everyone have access to email and a computer? If not, consider paper
  - ▶ If your organization is small, it might be easier to do paper

## Web and Paper Response Rates



	Average Response Rate				
Mode	Hospitals 94% web	Medical Offices 94% web	Ambulatory Surgery Centers 93% web	Nursing Homes 37% web	
Web	48%	58%	57%	45%	
Paper	40%	72%	87%	52%	
Both	47%	52%			

#### Web Survey



- Test the web survey to make sure the content is correct and responses are captured correctly in data exports
- Publicize and promote the survey

#### Web Survey Administration Steps

1 Prenotification email

2 Survey Invitation email Weekly reminder emails



#### **Paper Survey**



- Determine how to distribute and return completed paper surveys
- Print and assemble survey materials
- Publicize and promote the survey

#### **Paper Survey Administration Steps**

1 Prenotification letter (optional)

2 First paper survey packet

3 Second paper survey packet

Weekly response rates to POCs

### Tips for Improving Response Rates



- 1. Active involvement of leadership
  - Providing resources (budget, staff, materials, etc.)
  - Visibly supporting the survey and encouraging participation
- 2. Promote, promote and promote the survey!
  - Posters, flyers, emails, newsletters
- 3. Foster a spirit of friendly competition
  - Weekly response rate statistics and reminders
- 4. Consider offering individual, department or site incentives
  - A lottery drawing for prizes such as gift cards
  - Prizes for the highest response rates—dessert trays, breakfasts, lunches, pizza parties, ice cream socials



### One health system's success story



- Improved response rate from 12% (2017) to 72% (2018)
- Hung safety vests and placed safety cones all around the hospital and clinics
- The leadership team walked around to all areas wearing safety vests, handing out candy in hardhats
- Gave staff specific examples of how safety culture applied to their unit to emphasize that safety is important at all levels and units
- Sent weekly reminders

"Showing staff how previous survey results were used to make improvements was crucial for getting staff buy-in."

-Director of Continuous Improvement, 200-bed Midwest hospital



This year's safety improvements: The survey begins during patient safety awareness week



Safety doesn't happen by accident, we need your input



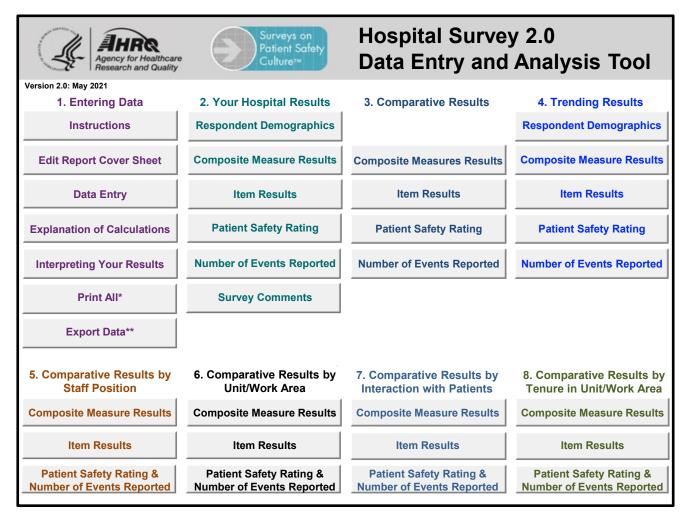


# **Analyzing the Data**

#### **SOPS Data Entry and Analysis Tools**



- Enter or import your data and it automatically calculates your results
- Produces charts comparing your scores to the most recent SOPS Database results
- Available for all SOPS surveys and supplemental item sets
- Email:
   <u>DatabasesOnSafetyCulture@westat.com</u>



#### **Open Ended Comments**



- Review a sample of written comments and code them into themes
- Share examples of written comments in addition to the numeric survey scores
  - Provide comments at the unit level and/or by staff position
- Comments illustrate the themes brought up by the survey and reflect the voices of providers and staff
  - Can provide specific suggestions for improvements or priority areas





## **Action Planning for Improvement**

#### You've shared your survey results, now what?



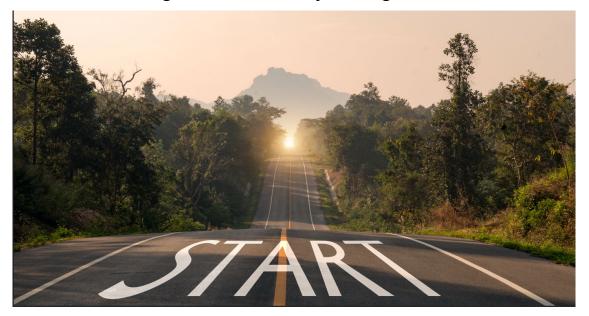
- Many organizations struggle to achieve value and lasting change from surveys
- Patient safety culture surveys can
  - Signal the importance of patient safety and raise awareness
  - ▶ But they should not be viewed as the "intervention"—they are assessment tools

### Changing your perspective on surveys



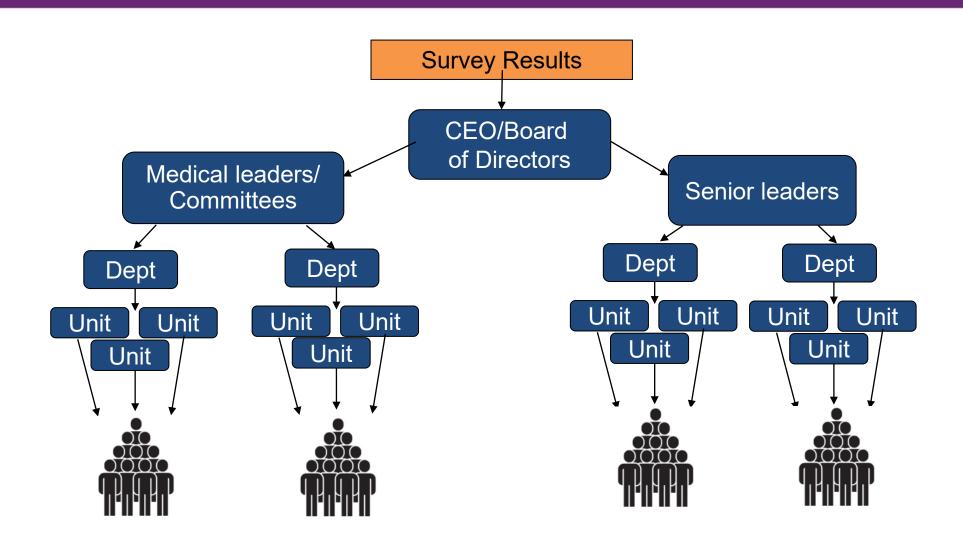
"The perceived failure of surveys to create lasting change is due to faulty or nonexistent action planning or survey follow-up. Delivery of results is NOT the end point in the survey process, it is just the beginning."

—Allan Church, Industrial-Organizational Psychologist



#### **Share Survey Results**





#### **SOPS Action Planning Steps**



- ► Form an Action Planning Team
- Develop Action Plans
  - 1. Identify Areas for Improvement
  - 2. Plan Your Improvement Initiative
  - 3. Communicate Your Action Plan
- ► Complete the SOPS Action Plan Template



## **Develop Action Plans**



Enable departments and units to develop and submit their own action plans

Identify Areas to Improve

Plan Your Improvement Initiatives

#### **Action Plans**





- What areas do you want to focus on for improvement?
- ▶ What are your "SMART" goals?
  - Specific
  - Measurable
  - Achievable
  - Relevant
  - Time bound

#### **Action Plans**





- ▶ What initiative will you implement?
- ▶ What resources will you need?
- What are possible barriers and how can you overcome them?
- ► How will you measure progress and success?
- ► Will you pilot test the initiatives?
- What is the timeline?

#### **Action Plans**





- ► How will you share your action plan?
- ► How will you provide progress updates on your action plan?

# **Action Plan Template**



Action Plan for the AHRQ Surveys on Patient Safety Culture		
1. Identifying Areas To Improve		
1a. What areas do you want to focus on for improvement?		
1b. What are your "SMART" goals?		
Notes or Comments		

### Improving Patient Safety Resource Lists



#### Improving Workplace Safety in Hospitals: A Resource List for Users of the AHRQ Workplace Safety Supplemental Item Set

#### Purpose

This document provides a list of references to websites and other publicly available resources that hospitals can use to improve workplace safety for providers and staff. While this resource list is not exhaustive, it is designed to give initial guidance to hospitals seeking information about workplace safety initiatives.

#### II. How To Use This Resource List

Resources are listed in alphabetical order, organized by the Surveys on Patient Safety Culture™ (SOPS®) composite measures assessed in the Agency for Healthcare Research and Quality (AHRQ) Workplace Safety Supplemental Item Set for the SOPS Hospital Survey, followed by general resources.

For easy access to the resources, keep the file open rather than printing it in hard copy, because many of the website URLs are hyperlinked.

**Feedback.** Suggestions for resources you would like added to the list, questions about the survey, or requests for assistance can be addressed to: <a href="mailto:SafetyCultureSurveys@westat.com">SafetyCultureSurveys@westat.com</a>.

**NOTE:** The resources included in this document do not constitute an endorsement by the U.S. Department of Health and Human Services (HHS), the Agency for Healthcare Research and Quality (AHRQ), or any of their employees. HHS does not attest to the accuracy of information provided by linked sites.

#### IV. Resources by Composite Measure

The following resources are organized according to the relevant AHRQ SOPS Workplace Safety Supplemental Item Set for Hospitals composite measures they are designed to help improve.

#### Composite Measure 1. Exposure to Workplace Hazards

- 1. Centers for Disease Control and Prevention (CDC) Resources
  - Hierarchy of Controls
     https://www.cdc.gov/niosh/topics/hierarchy/default.html

The National Institute for Occupational Safety and Health (NIOSH) has developed a Hierarchy of Controls framework that helps organizations reduce the risk of occupational exposure to a range of workplace hazards. The framework presents five levels of control ranked in a pyramid according to their effectiveness. The most effective is (1) elimination, followed by (2) substitution, (3) engineering controls, (4) administrative controls, and (5) personal protective equipment.

 Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic

https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html

This interim guidance provides recommendations on infection prevention and control (IPC) practices for routine healthcare delivery during the pandemic and recommended IPC practices when caring for a patient with suspected or confirmed SARS-CoV-2 infection. This guidance is applicable to all U.S. settings where healthcare is delivered.



### **Submitting to the SOPS Databases**

#### **SOPS Database Submission Schedule**

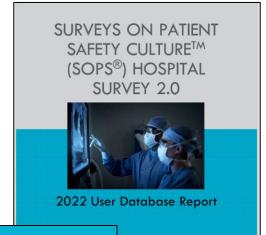


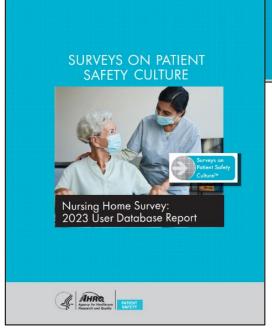
SOPS Survey and Supplemental Item Set		2024	
	<ul><li>Hospital 2.0</li><li>Health IT Patient Safety</li><li>Workplace Safety</li><li>Value and Efficiency</li></ul>	June 3-21	
	Nursing Home  • Workplace Safety	October 1-21	

#### Why Participate in the SOPS Databases?



- Free to participate and we provide technical assistance
- Participating facilities receive a customized feedback report
  - Displays site results compared with database results
  - Helps identify strengths and areas for patient safety culture improvement
- AHRQ produces Database Reports and infographics that display aggregated results from all participating sites





#### **Database Requirements for Participation**



1. Administered a SOPS survey in its entirety without modifications or deletions

—with or without SOPS supplemental item sets

2. Must be located in the U.S. or U.S. territories

3. Sign a Data Use Agreement that specifies how the data will be used and protected

4. Submit data files per specifications through a secure, online data submission system

### **SOPS Technical Assistance (TA)**



#### **General TA email**

SafetyCultureSurveys@westat.com

- Survey administration
- Survey materials and resources
- International requests

#### **Database TA email**

DatabasesOnSafetyCulture@westat.com

- Data submission
- Data Entry and Analysis Tool
- Database reports
- Analytic requests

www.ahrq.gov/SOPS



#### Sign up for SOPS Email Updates



