

The SOPS Ambulatory Surgery Center Survey

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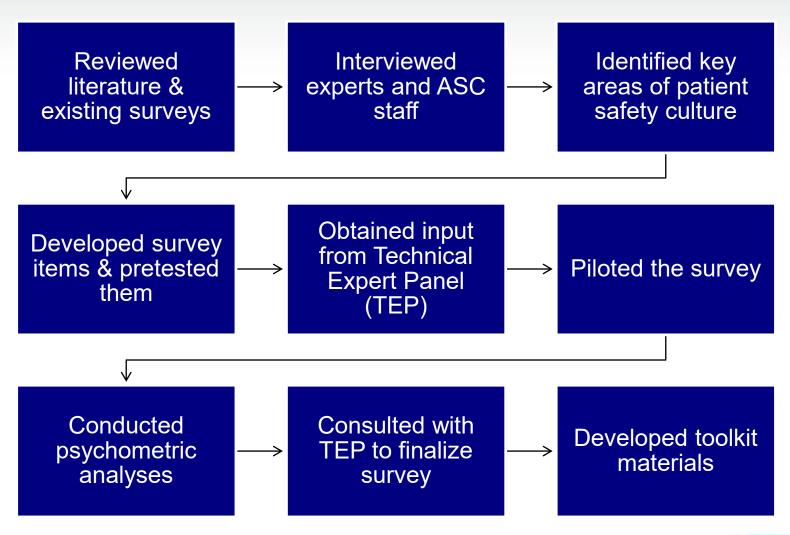
Development of the ASC SOPS

- ASC SOPS was developed and pilot tested under AHRQ's Safety Program for Ambulatory Surgery
- 4-year project in ASCs (2012 2016)
- Goals of the project were to:
 - Reduce infections and surgical harm through the use of a surgical safety checklist
 - Improve safety culture through teamwork and communication





ASC Survey Development Process







ASC Survey Measures

- 27 items assess 8 composite measures of patient safety culture
 - 1. Communication About Patient Information
 - 2. Communication Openness
 - 3. Staffing, Work Pressure, and Pace
 - 4. Teamwork
 - 5. Staff Training
 - 6. Organizational Learning—Continuous Improvement
 - 7. Response to Mistakes
 - 8. Management Support for Patient Safety
- Near-Miss Documentation
- Overall Rating on Patient Safety (Excellent to Poor)
- Communication in the Procedure/Surgery Room





ASC Survey Pilot Test

- 59 ASCs in 20 states in 2014
- 1,821 respondents
- Average ASC response rate: 77%
- Average number of completed surveys per ASC: 31
 - Range: 5 to 90





ASC Composite Results

■ % Positive Response

Organizational Learning-Continuous Improvement

92%

Communication About Patient Information

91%

Management Support for Patient Safety

89%

Teamwork

86%





ASC Composite Results

■ % Positive Response

Communication Openness 85% **Response to Mistakes** 82% **Staff Training** 78% Staffing, Work Pressure, & Pace 76%





Top Performing Items

■ % Positive Response

Communication About Patient Information

Important patient care information is clearly communicated across areas in this facility

96%

Within this facility, we do a good job communicating information that affects patient care

95%





Bottom Performing Items

■ % Positive Response

Staff Training

Staff feel pressured to do tasks they haven't been trained to do

72%

Staffing, Work Pressure, & Pace

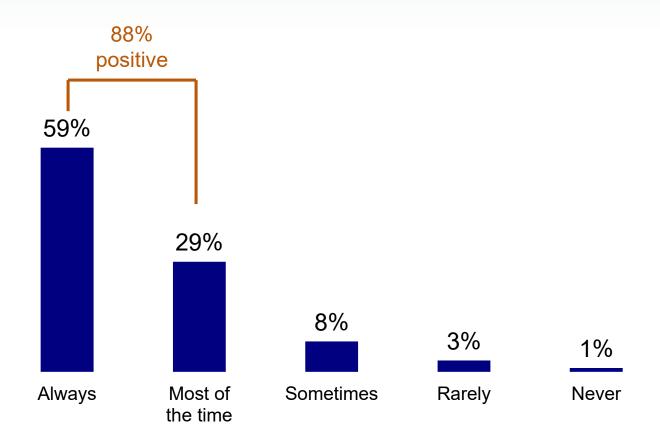
We feel rushed when taking care of patients

58%



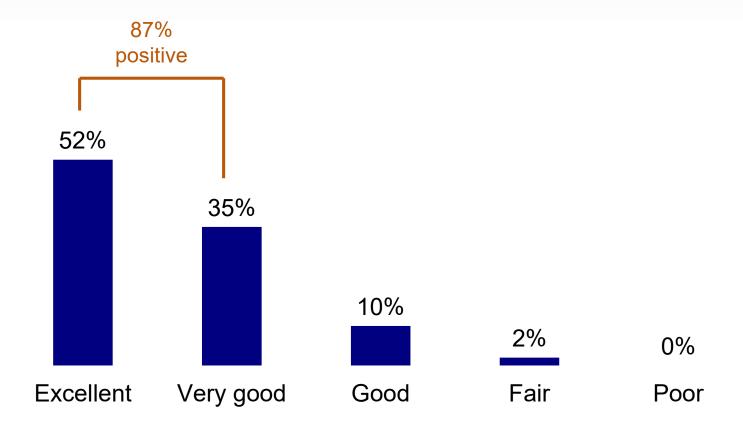


Near Miss Documentation





Overall Rating on Patient Safety







Communication in the Surgery/Procedure Room

■ % Positive Response

Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done

92%

Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns

65%

Immediately after procedures, team members discussed any concerns for patient recovery

73%



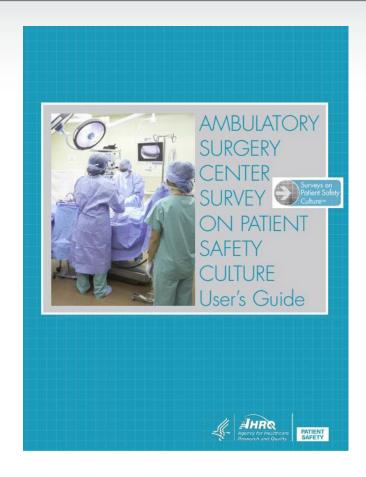


Survey Administration





Survey User's Guide



https://www.ahrq.gov/sites/default/files/wysiwyg/professionals/quality-patientsafety/patientsafetyculture/asc/userguide/ascusersguide.pdf



Data Collection

- Can be paper or web-based
 - Paper generally yields higher response rates but takes more time and up-front resources
- Can hire a vendor or do the work in-house
- If surveying multiple sites, each ASC needs an identifying number so responses can be linked to a specific site





Who Should Take The Survey?

- Designed to be administered to <u>all</u> staff as appropriate, including:
 - Physicians, nurses, nurse anesthetists, technicians, management, administrative staff, clerical and business staff
- Staff should have:
 - Worked at the ASC at least 4 times in the past month AND
 - Been working at the ASC for at least 6 months
- Can be administered to staff who work at more than one ASC
 - Answer about the site where they spend most of their time





Survey Timeline

Tasks	Prep/ Planning	Week 1	Week 2	Week 3	Week 4	Weeks 5 / 6
Determine resources and scope	√					
Establish an ASC point of contact	✓					
Decide whether to use an outside vendor	√					
Prepare survey materials (paper or web)		✓				
Promote the survey			\checkmark	\checkmark	\checkmark	\checkmark
Send first survey invitation				\checkmark		
Send weekly reminders					\checkmark	\checkmark
Close out data collection						\checkmark



Calculating and Presenting Results





Data Entry and Analysis Tool



Agency for Healthcare Research and Quality
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AMBULATORY SURGERY CENTER
SURVEY ON PATIENT SAFETY CULTURE

Data Entry and Analysis Tool

Version 1.0, October 2014

1.	Ent	teri	ina	Dat	a
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Instructions

Edit Report Cover Sheet

Data Entry

Explanation of Calculations

Interpreting Your Results

Print All*

Export Data**

2. Your Ambulatory Surgery Center (ASC) Results

Respondent Demographics

Composite Level Results

Item Level Results

Near-Miss Documentation

Overall Rating on Patient Safety

Communication in the Surgery/Procedure Room

Survey Comments

3. Comparative Results

Not Applicable

Composite Level Results

Item Level Results

Near-Miss Documentation

Overall Rating on Patient Safety

Communication in the Surgery/Procedure Room 4. Comparative Results by Staff Position

Not Applicable

Composite Level Results

Item Level Results

Near-Miss Documentation

Overall Rating on Patient Safety

Communication in the Surgery/Procedure Room 5. Comparative Results by Staff Typically in the Surgery/Procedure Room

Not Applicable

Composite Level Results

Item Level Results

Near-Miss Documentation

Overall Rating on Patient Safety



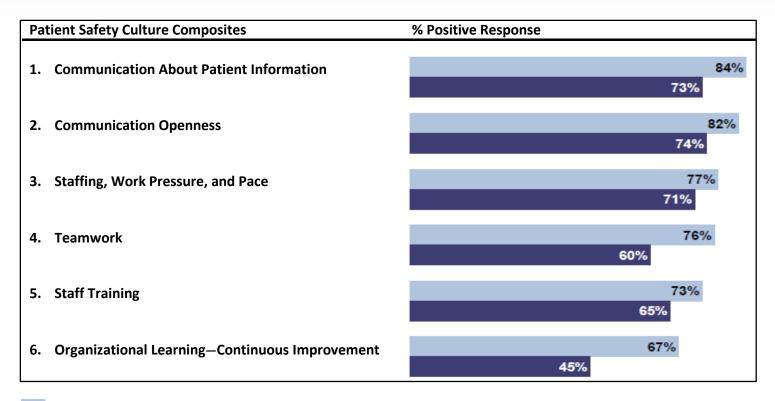
^{*}The Tool Prints 34 pages and comments.

^{**}Prior to submitting your data, please run the "Export Data" feature to extract your data to a new workbook.



Sample Excel Tool Results

Composite-Level Comparative Results for Sample ASC



Database

Your Ambulatory Surgery Center





Share Survey Results



Leadership



Department managers



Clinicians and staff





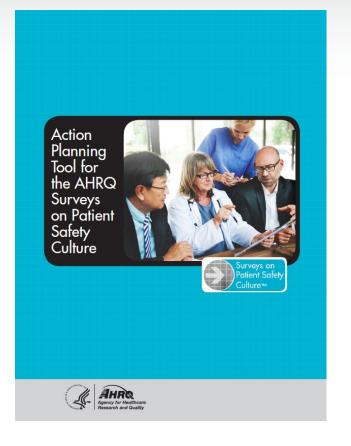
Using Survey Results for Improvement





Action Planning Tool

- Define goals and select initiative
- Plan initiative
- Timeline
- Communication action plan







Action Planning for the SOPS Surveys Webcast

Thursday, January 17 12 – 1 p.m. ET



Jeff Brady, MD, MPH
Director, Center for Quality Improvement and Patient Safety, AHRQ
Rear Admiral, Assistant Surgeon General, U.S. Public Health Service



Laura Gray, MPH
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Senior Study Director,
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The SOPS ASC Database





Goals of the SOPS ASC Database

- Present survey results from a large number of ASCs
- Present results by
 - Facility characteristics (e.g. primary ownership, size, etc.)
 - ► Respondent characteristics (e.g. staff position, etc.)
- Enable ASCs to identify strengths and opportunities to improve patient safety culture
- In future ASC databases:
 - Present trends and examine changes in patient safety culture over time





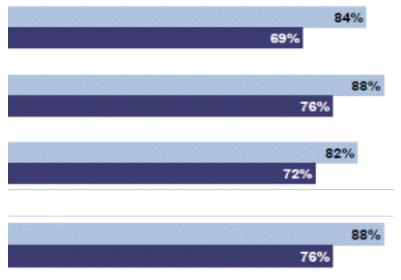
Benefits of Participation

- A Database Report is produced providing aggregate ASC-level statistics
- Each participating ASC receives a feedback report comparing their results to the Database

Communication About Patient Information

- Important patient care information is clearly communicated across areas in this facility. (A1) (NA/DK/MI=0%)
- 2. Key information about patients is missing when it is needed. (A7R) (NA/DK/MI=0%)
- 3. We share key information about patients as soon as it becomes available. (A10) (NA/DK/MI=0%)
- 4. Within this facility, we do a good job communicating information that affects patient care. (A12) (NA/DK/MI=0%)

Sample feedback report graphs



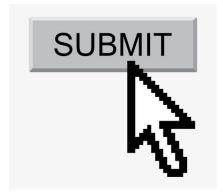




When to Submit

SOPS ASC Database Submission

June 3 – July 22, 2019







Eligible ASCs

- Are CMS-certified and approved ASCs with a valid CMS Certification Number (CCN)
- Provide surgical/procedural services to patients that do not require hospitalization (except in unusual circumstances)
- <u>Do not</u> share space with a hospital or hospital outpatient surgery department





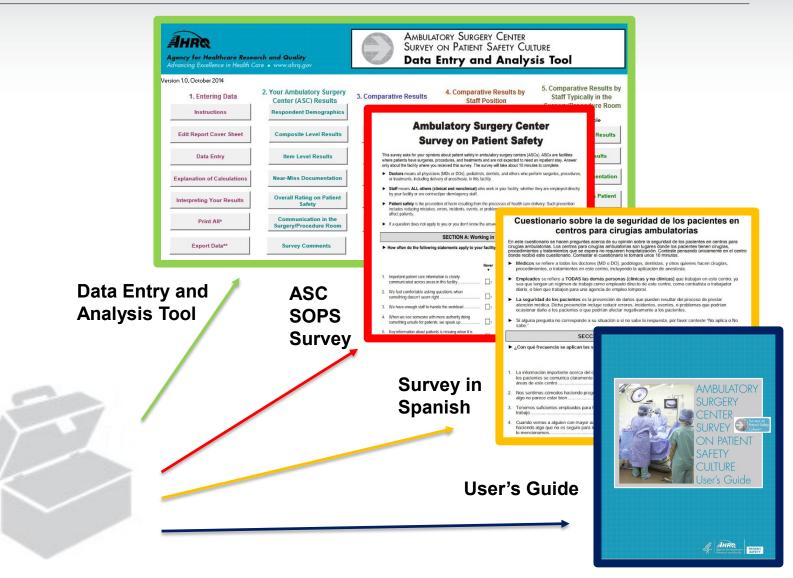
Submission Requirements Submission Requirements

- Have a valid CCN number for your ASC
- Administer the ASC SOPS in its entirety without modifications or deletions
- Complete data collection before the end of the data submission period, and format data file according to specifications
- Sign a Data Use Agreement that indicates how the data will be used
- Upload survey data through a secure, online data submission system



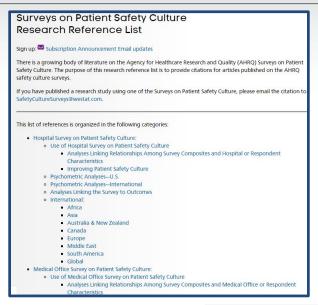


ASC SOPS Toolkit Materials





ASC SOPS Resources



Resources by Composite

The following resources are organized according to the relevant Ambulatory Surgery Center Survey on Patient Safety Culture composites they can help improve. Some resources are duplicated and cross-referenced because they may apply to more than one composite.

Composite 1. Communication About Patient Information

1. Ambulatory Surgery Surgical Checklist

http://www.scoap.org/downloads/SCOAP-Surgical-Checklist-DRAFT-3-1.pdf

SCOAP (Surgical Care and Outcomes Assessment Program), a program of the Foundation for Health Care Quality, provides a free, downloadable surgical checklist for ambulatory surgery. The one-page checklist was adapted from the WHO "Safe Surgery Saves Lives" campaign and a surgical checklist developed by the Washington State Ambulatory Surgery Association and Proliance Surgeons. It addresses what actions need to be taken during three steps: prior to incision, process control, and debriefing (at completion of case).

2. AORN Comprehensive Surgical Checklist

https://www.aorn.org/aorn-org/guidelines/clinical-resources/tool-kits/correct-site-surgery-tool-kit/aorn-comprehensive-surgical-ehecklist

The Association of periOperative Registered Nurses (AORN) Comprehensive Surgical Checklist was created to support a facility's need to use a single checklist that includes the safety checks outlined in the World Health Organization's (WHO) Surgical Safety Checklist, while also using the safety checks within The Joint Commission's Universal Protocol to meet accreditation requirements. It offers guidance for pre-procedure check-in, sign-in, time out, and sign out. Open-ended questions are also included under the time out portion to encourage active participation from all members of the surgery team. This comprehensive surgical checklist was created in collaboration with AORN Perioperative Nursing Specialist Robin Chard, AORN President Charlotte Guglielmi, contributors to the WHO Surgical Safety Checklist, including Aul Gawande, M.D., M.P.H., and representatives from The Joint Commission.

Research Reference List

Action Plan for the AHRQ Surveys on Patient Safety Culture					
ity Name: last updated: ining Your Go		age 1			
What areas do you want to focus on for improvement?					
What are your goals?					
What initiative will you implement?					
	last updated: ining Your Go What areas do you want to focus on for improvement? What are your goals?	ity Name: last updated: Instrument of the state of the st			

Resource List





SOPS Technical Assistance (TA)

General TA
 SafetyCultureSurveys@westat.com
 1-888-324-9749

Database TA
 DatabasesOnSafetyCulture@westat.com
 1-888-324-9790





SOPS Updates

Sign up for email updates

