The Surveys on Patient Safety Culture (SOPS) are a set of surveys developed by the Agency for Healthcare Research and Quality (AHRQ). The surveys assess provider and staff opinions about patient safety culture in three healthcare settings: hospitals, outpatient medical offices, and nursing homes.

This update is intended to help SOPS users stay informed about new developments, tools, and resources that are available for the surveys. Please feel free to share this information. For further details and information, visit the AHRQ Web site at www.ahrq.gov/qual/patientsafetyculture.

Database News

Data Submission for the Medical Office Survey on Patient Safety Culture Opened September 15 to October 31

AHRQ invited users of the Medical Office Survey on Patient Safety Culture (Medical Office SOPS) to submit data to a new comparative database modeled after the Hospital and Nursing Home SOPS Comparative Databases. This new database will enable medical offices to compare their survey results with other medical offices across the country.

Participation was open to all medical offices in the United States or its territories that administered the AHRQ Medical Office SOPS and were willing to voluntarily submit data to this new database. AHRQ will use the data to produce a comparative database report similar to the 2011 Hospital Comparative Database Report (www.ahrq.gov/qual/hospsurvey11). Until the first comparative database report is released by AHRQ in Spring 2012, medical offices can compare to the 2010 Preliminary Comparative Results (www.ahrq.gov/qual/mosurvey10/moresults10.htm).

For more information about data submission, visit www.ahrq.gov/qual/mosurvey11/mosubinfo.htm.

E-mail questions to DatabasesOnSafetyCulture@ahrq.hhs.gov or call 1-888-324-9790.
Database News

New Results From the 2011 Nursing Home Comparative Database Report

The first AHRQ Nursing Home Survey on Patient Safety Culture Comparative Database Report was released in August 2011 with data from 16,155 staff in 226 U.S. nursing homes. The report finds that 86 percent of nursing home staff participating in the survey feel that residents are well cared for and safe, and 76 percent would recommend the nursing home as safe (see Figure 1).

However, nonpunitive response to error is an area for improvement, with only 56 percent believing staff are treated fairly when they make mistakes and 55 percent feeling that it is safe to report mistakes. Staffing is another low-scoring area in which only 41 percent of respondents feel their nursing home has enough staff to handle the workload.

The report contains detailed comparative data by nursing home bed size and ownership and by staff characteristics such as job titles, work areas, extent of direct patient contact, and shift worked. Review the report at www.ahrq.gov/qual/nhsurvey11/.

Respondents Willing To Recommend Their Nursing Home To Friends

On average across nursing homes, most respondents indicated that they would tell their friends that this is a safe nursing home for their family.

Figure 1. Average Percentage of Respondents Willing To Recommend Their Nursing Home (N=226 nursing homes)

![Graph showing average percentage of respondents willing to recommend their nursing home.]

Events

Webinar Highlights: Using the Medical Office Survey on Patient Safety Culture


Lessons Learned From a Large Implementation of the Medical Office SOPS

Lyle J. (LJ) Fagnan, M.D., Associate Professor of Family Medicine at Oregon Health & Science University and Director of the Oregon Rural Practice-based Research Network (ORPRN), presented lessons learned from surveying 311 primary care clinics through 11 practice-based research networks (PBRNs). The PBRNs reported that going to the medical offices to introduce the survey and engage in in-person contact worked best for distributing and collecting the surveys. They also highlighted the helpfulness of following up with e-mails and phone calls, providing food to incentivize clinic participation, providing a good presentation to staff, and time for questions to ensure a higher response rate. The PBRNs cautioned that you need to explain the results carefully to staff so that they can understand the negatively worded items. Overall, they found that the survey was well received and that staff appreciated the opportunity to share their opinions.

Development and Pilot Testing of the Medical Office SOPS

John Hickner, M.D., M.Sc., Chairman, Family Medicine, Cleveland Clinic, discussed the development of the survey, released by AHRQ in January 2009. The survey is intended to raise staff awareness about patient safety; assess the current status of patient safety culture; identify areas for internal patient safety and quality improvement; evaluate the impact of patient safety and quality improvement initiatives; and track patient safety culture change over time.
Surveys on Patient Safety Culture (SOPS) Comparative Database Results and New Analyses

Naomi Dyer, Ph.D., Senior Study Director at Westat, presented findings from the 2010 Medical Office SOPS Preliminary Comparative Results as well as results from new analyses (see the report at www.ahrq.gov/qual/mosurvey10/moresults10.htm). The Medical Office SOPS preliminary database consists of 470 medical offices with 10,567 provider and staff respondents. Teamwork was the highest-scoring dimension of patient safety culture, with an 82 percent average percent positive response. Sixty-four percent of staff gave their medical office an overall rating on patient safety of “Excellent” or “Very Good.”

Dr. Dyer also shared results from new analyses examining differences in patient safety culture perceptions between physicians and other medical office staff and the relationship of medical office characteristics such as size, ownership, specialty, and health information technology (IT) implementation to the survey results.

- **Staff Position:** Overall, management and physicians were more positive than other staff on 11 of the 15 measures.
- **Office Size:** Smaller medical offices had slightly more positive patient safety culture scores than larger medical offices.
- **Ownership:** Physician/provider-owned medical offices had more positive patient safety culture scores than hospital/health-system-owned and university/academic-owned medical offices.
- **Specialty:** Single specialty medical offices had slightly more positive patient safety culture scores than multispecialty offices.
- **Health IT Implementation:** Overall health IT implementation was not strongly related to patient safety culture scores, but medical offices with greater electronic medical record (EMR) implementation had slightly higher patient safety culture scores.

SOPS Sessions at the AHRQ Annual Meeting, September 18–21

The Agency for Healthcare Research and Quality’s (AHRQ) Annual Conference, Leading Through Innovation & Collaboration, was held at the Bethesda North Marriott Hotel & Conference Center. Presentation materials will be available at www.ahrq.gov.

Two sessions about SOPS were featured on Monday, September 19.

**AHRQ Nursing Home Survey on Patient Safety Culture,** 12 noon – 1:00 p.m. Track A, Session Number 108 (Lunch and Learn Sessions). This session described the development of the Nursing Home Survey on Patient Safety Culture, presented comparative data from the 2011 report, and discussed analyses linking the patient safety culture data to Nursing Home Compare quality and safety data.

**Collaborative Learning From Patient Safety: Presentation From PSOs and International Patient Safety Culture,** 3:30 p.m. – 5:00 p.m. Track A, Session Number 38. This session focused on early findings from Patient Safety Organizations. It also included a presentation describing a World Health Organization (WHO) patient safety project and other international initiatives that use the AHRQ SOPS to examine patient safety culture.

**Toolkit Materials**

**Updated SOPS Data Entry and Analysis Tools**

The SOPS Data Entry and Analysis Tools work with Microsoft Excel® and make it easy to input your individual-level data from the AHRQ patient safety culture surveys. The tools automatically create tables and graphs to display your survey results. The following updates have been made to the tools (all use Microsoft Excel® 2007 or higher):

- **Hospital Data Entry and Analysis Tool:** Updated to include comparative data from the 2011 Hospital Comparative Database results.
- **Nursing Home Data Entry and Analysis Tool:** Updated to include comparative data from the 2011 Nursing Home Comparative Database results.
- **Medical Office Data Entry and Analysis Tool:** Updated to include the 2010 Preliminary Medical Office Comparative Results.

To request any of the Data Entry and Analysis Tools, send an e-mail to DatabasesOnSafetyCulture@ahrq.hhs.gov and specify which tool you would like (hospital, nursing home, or medical office).
AHRQ is currently developing a new survey addressing patient safety culture in community/retail pharmacies. This survey is designed to be completed by all pharmacy staff, including pharmacists, technicians, and clerks. The survey will assess important medication safety issues and includes questions about various dimensions of patient safety in pharmacies, including dispensing mistakes and patient counseling. Recruitment for pharmacy sites to participate in this groundbreaking pilot study is underway, with the pilot administration to begin in early 2012.

The pilot survey, which will be administered as a paper survey, takes about 15-20 minutes to complete and assesses various areas of patient safety culture in pharmacies, including:

- Communication about Mistakes
- Communication Openness
- Compliance with Procedures
- Documenting Dispensing Mistakes
- Handoffs Within and Across Shifts
- Organizational Learning—Continuous Improvement

AHRQ is currently seeking pharmacy sites interested in participating in the pilot study. The following types of pharmacies are eligible to participate:

- Traditional chain drug stores,
- Independent pharmacies,
- Supermarket pharmacies, and
- Mass market pharmacies.

To express interest in participating in the pilot study or to find out more information, please contact SafetyCultureSurveys@ahrq.hhs.gov. AHRQ expects to release the new Pharmacy Survey on Patient Safety Culture and toolkit materials on the AHRQ Web site in Summer 2012.
Spotlight on CAHPS®

This spotlight focuses on the patient experience surveys and related news from the Consumer Assessment of Healthcare Providers and Systems (CAHPS) program. AHRQ sponsors both CAHPS and SOPS as part of its portfolio of surveys to measure and drive improvements in the quality and safety of health care. To learn more about CAHPS, visit www.cahps.ahrq.gov or e-mail questions to cahps1@ahrq.gov.

AHRQ Releases New Patient-Centered Medical Home Item Set for Use With the CAHPS Clinician & Group 12-Month Survey

As physicians’ offices around the country embrace the concept of the patient-centered medical home, it is becoming increasingly important to determine how well the medical home model meets patients’ needs. One way to assess the impact of medical homes is to ask patients directly about their experiences with care.

To better capture experience with the domains of care addressed by medical homes, AHRQ’s CAHPS Consortium has developed and tested an expanded version of the CAHPS Clinician & Group Surveys that combines the 12-Month Survey with a specific set of supplemental items. This new set of items, called the CAHPS Patient-Centered Medical Home (PCMH) Item Set, covers topics such as provider-patient communication, coordination of care, and shared decision making. A pre-assembled survey that incorporates the supplemental items into the 12-Month Survey is now available for use by medical practices, health systems, health plans, and others.

Key Features of the Survey for Patient-Centered Medical Homes

Built on an existing survey. Because the 12-Month Survey remains the foundation of this instrument, users benefit from the standardization and familiarity of the core Clinician & Group Survey. At the same time, they have the flexibility of optional supplemental items that assess additional aspects of care that are increasingly important to medical practices.

Customizable to meet different needs. The 12-Month Survey with PCMH Items can be used to assess patients’ experiences with any primary care practice, not just those that are explicitly functioning as medical homes. In addition to the PCMH supplemental items, users are free to add their own survey items to meet specific information needs.

Developed in accordance with CAHPS principles. The development and testing of the PCMH Item Set was consistent with design principles that emphasize input from consumers and other stakeholders and the use of the best available survey science. Learn about CAHPS Principles at www.cahps.ahrq.gov/About-CAHPS/Principles.aspx.

Chosen for recognition programs. The National Committee for Quality Assurance (NCQA) and others are using this survey for PCMH recognition. See below for more on NCQA’s use of this survey.

Available with free resources and support. Like other CAHPS survey products, the PCMH Item Set is in the public domain. It is also accompanied by free instructions and a SAS®-based analysis program to guide survey users through the process of preparing their own questionnaire, selecting a sample, collecting and analyzing the data, and reporting results. AHRQ also offers free access to the CAHPS Help Line at cahps1@ahrq.gov or 1-800-492-9261.

Supported by free comparative information. Users of the 12-Month Survey with PCMH Items can submit their data to the CAHPS Database to get access to free comparative information.

Use of the PCMH Survey by National Committee for Quality Assurance

The National Committee for Quality Assurance (NCQA) has a recognition program for patient-centered medical homes. Included in its standards is an optional patient experience evaluation that can help to qualify a practice for a higher level of recognition. In September 2011, NCQA announced that it is recommending the CAHPS Clinician & Group 12-Month Survey with the PCMH Item Set for this optional standard. Information on this program is available at www.ncqa.org/tabid/631/default.aspx.

Learn More About the PCMH Item Set

👉 Read about the CAHPS Clinician & Group Surveys (www.cahps.ahrq.gov/Surveys-Guidance/CG.aspx).

For More Information

For more details about the SOPS program, copies of the surveys, and toolkit materials, visit www.ahrq.gov/qual/patientsafetyculture.

Technical Assistance

• SafetyCultureSurveys@ahrq.hhs.gov 1-888-324-9749
• DatabasesOnSafetyCulture@ahrq.hhs.gov 1-888-324-9790