Overview of the SOPS Surveys

Laura Gray, MPH

Senior Study Director
User Network for the AHRQ Surveys on Patient Safety Culture (SOPS)
Westat
What is Patient Safety Culture?

Patient Safety Culture
The beliefs, values, norms, shared by health care staff

Determines behaviors that are:
- Rewarded
- Supported
- Expected
- Accepted

Exists at multiple levels:
- System
- Hospital
- Department
- Unit
AHRQ Surveys on Patient Safety Culture

Surveys of providers and staff about the extent to which the organizational culture supports patient safety

- Hospital (2004)
- Nursing Home (2008)
- Medical Office (2009)
- Community Pharmacy (2012)
- Ambulatory Surgery Center (2015)
Areas of Patient Safety Culture Assessed Across SOPS Surveys

- Teamwork
- Communication Openness
- Communication About Error
- Organizational Learning—Continuous improvement
- Response to Error
- Staffing
- Supervisor/Management Support for Patient Safety
- Work Pressure and Pace
- Overall Rating on Patient Safety
How are SOPS surveys used?

- **Raise** staff **awareness** about patient safety;
- **Assess** patient safety culture;
- **Identify** strengths and **areas for improvement**;
- **Evaluate** trends **over time**;
- **Evaluate** the impact of patient safety **initiatives**.
"The survey is an integral part in moving toward our goal of being a high-reliability organization. It laid the groundwork for us. If we didn't have that, it would be much more difficult."

"We knew the survey would be a critical tool for improving patient care, but what we didn’t foresee was how valuable it would be in strengthening a team perspective among staff."

AHRQ’s Medical Office Survey Helps Colorado Hospital Provide Better Care: https://www.ahrq.gov/news/newsroom/case-studies/201525.html
The Value of SOPS Surveys

"The entire survey process opens opportunities to discuss patient safety, and the results help shape our improvement efforts—ultimately improving patient care."

Trademark

- The Surveys on Patient Safety Culture™ or SOPS™ is a registered trademark of AHRQ.
- Organizations that administer an existing SOPS survey, with or without supplemental items, may use the SOPS name as long as the core items and response options of the survey have not been changed, omitted, or reordered.
Optional Supplemental Items

• All SOPS surveys have core items—that support the comparability of survey content across users

• Optional supplemental items can be added

• Add supplemental items toward the end of the SOPS surveys
Value and Efficiency Supplemental Items (Hospital & Medical Office)

1. Empowerment to Improve Efficiency (3 items)
2. Efficiency and Waste Reduction (3 items)
3. Patient Centeredness and Efficiency (3 items)
4. Management Support for Improving Efficiency and Reducing Waste (4 items)
Health IT Patient Safety Supplemental Items (Hospital)

1. Patient Safety and Quality Issues (5 items)
2. EHR System Training (3 items)
3. EHR System Support and Communication (3 items)
4. EHR and Workflow/Work Process (3 items)
5. Overall EHR System Rating (1 item)
Diagnostic Safety Supplemental Items (Medical Office)

• Goals of the items
  – To measure the extent to which the organizational culture in medical offices supports accurate diagnoses
  – Conduct research to assist in identifying processes and sources of error in diagnosis
Diagnostic Safety Supplemental Items (Medical Office)

1. Review literature and existing surveys
2. Identify and convene Technical Expert Panel (TEP)
3. Interview experts, providers, and staff
4. Identify key thematic areas
5. Develop & cognitively test draft items
6. Obtain input from Technical Expert Panel (TEP)
7. Pilot test
8. Conduct psychometric analyses
9. Consult with TEP to finalize items
Update of the Hospital SOPS Survey: HSOPS 2.0

• Goals of HSOPS 2.0

1. Add a “Does not apply/Don’t know” response option
2. Reword complex or difficult to translate items
3. Test new items with new areas of focus, such as Just Culture
4. Reduce the length of the survey
5. Revise and expand staff position and work areas
Update of the Hospital SOPS Survey: HSOPS 2.0

• Conducted a 2017 pilot test and split-sample bridge study in 44 hospitals
  – Found big differences in scores between HSOPS 1.0 and 2.0
  – Decided to continue further development and cognitive testing

• Will conduct another pilot test and bridge study in 20-25 hospitals in 2018

• Expect to release HSOPS 2.0 in summer of 2019
  – Updated toolkit materials and guidance