

**Hospital
Patient Safety Culture Survey Data Entry
Guide and
Data File Specifications**

Hospital Patient Safety Culture Survey Data Guide and Data File Specifications

These specifications are for preparing your respondent-level data from the Patient Safety Culture Survey for Hospitals, AHCA Form 3130-8015, October 2022. 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.

PROCEDURE:

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 3130-8015, October 2022 is available at <https://ahca.myflorida.com/schs/committeescouncils/indexpscs.shtml>.

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 disturbed 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: Administering the survey in its entirety without modifying or deleting items.

Step 4: The designated personnel or POC must complete successful registration into the PSCS System prior to submission of the facility's final survey data CSV file.

Step 5: Submit survey response data to the PSCS System using the PSCS Data Entry Tool for hospitals, available at: <https://ahca.myflorida.com/schs/committeescouncils/indexpscs.shtml>.

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

Survey Question	Variable Name	Response Values
Site ID	SITEID	If you are submitting data for multiple hospitals, then each site should have a unique Site ID. If you have data for only one hospital, 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)

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

Your Staff Position and Your Unit/Work Area

Survey Question	Variable Name	Response Values
1. What is your position in this hospital?	SP	1 = Advanced Practice Nurse (NP, CRNA, CNS, CNM) 2 = Licensed Vocational Nurse (LVN), Licensed Practical Nurse (LPN) 3 = Patient Care Aide, Hospital Aide, Nursing Assistant 4 = Registered Nurse (RN) 5 = Physician Assistant 6 = Resident, Intern 7 = Physician, Attending, Hospitalist 8 = Dietitian 9 = Pharmacist, Pharmacy Technician 10 = Physical, Occupational, or Speech Therapist 11 = Psychologist 12 = Respiratory Therapist 13 = Social Worker 14 = Technologist, Technician (e.g., EKG, Lab, Radiology) 15 = Supervisor, Manager, Department Manager, Clinical Leader, Administrator, Director 16 = Senior Leader, Executive, C-Suite 17 = Facilities 18 = Food Services 19 = Housekeeping, Environmental Services 20 = Information Technology, Health Information Services, Clinical Informatics 21 = Security 22 = Transporter 23 = Unit Clerk, Secretary, Receptionist, Office Staff 24 = Other, please specify blank = MISSING

TEXT FOR OTHER, PLEASE SPECIFY [SP, item 24] * - DO NOT SUBMIT TO DATABASE

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

Survey Question	Variable Name	Response Values
2. What is your primary unit or work area in this hospital?	WA	1 = Many different hospital units, No specific unit 2 = Combined Medical/Surgical Unit 3 = Medical Unit (Non-Surgical) 4 = Surgical Unit 5 = Cardiology 6 = Emergency Department, Observation, Short Stay 7 = Gastroenterology 8 = ICU (all adult types) 9 = Labor & Delivery, Obstetrics & Gynecology 10 = Oncology, Hematology 11 = Pediatrics (including NICU, PICU) 12 = Psychiatry, Behavioral Health 13 = Pulmonology 14 = Rehabilitation, Physical Medicine 15 = Telemetry 16 = Anesthesiology 17 = Endoscopy, Colonoscopy 18 = Pre-Op, Operating Room/Suite, PACU/Post Op, Peri Op 19 = Pathology, Lab 20 = Pharmacy 21 = Radiology, Imaging 22 = Respiratory Therapy 23 = Social Services, Case Management, Discharge Planning 24 = Administration, Management 25 = Financial Services, Billing 26 = Human Resources, Training 27 = Information Technology, Health Information Management, Clinical Informatics 28 = Quality, Risk Management, Patient Safety 29 = Admitting/Registration 30 = Food Services, Dietary 31 = Housekeeping, Environmental Services, Facilities 32 = Security Services 33 = Transport 34 = Other, please specify

TEXT FOR OTHER, PLEASE SPECIFY [WA, item 34] * - DO NOT SUBMIT TO DATABASE

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

SECTION A: Your Unit/Work Area

Survey Question	Variable Name	Response Values
1. In this unit, we work together as an effective team.	A1	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
2. In this unit, we have enough staff to handle the workload.	A2	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
3. Staff in this unit work longer hours than is best for patient care.	A3	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
4. This unit regularly reviews work processes to determine if changes are needed to improve patient safety.	A4	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
5. This unit relies too much on temporary, float, or PRN staff.	A5	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

Survey Question	Variable Name	Response Values
6. In this unit, staff feel like their mistakes are held against them.	A6	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
7. When an event is reported in this unit, it feels like the person is being written up, not the problem.	A7	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
8. During busy times, staff in this unit help each other.	A8	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
9. There is a problem with disrespectful behavior by those working in this unit.	A9	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
10. When staff make errors, this unit focuses on learning rather than blaming individuals.	A10	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
11. The work pace in this unit is so rushed that it negatively affects patient safety.	A11	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

Survey Question	Variable Name	Response Values
12. In this unit, changes to improve patient safety are evaluated to see how well they worked.	A12	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
13. In this unit, there is a lack of support for staff involved in patient safety errors.	A13	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
14. This unit lets the same patient safety problems keep happening.	A14	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

SECTION B: Your Supervisor, Manager, or Clinical Leader

Survey Question	Variable Name	Response Values
1. My supervisor, manager, or clinical leader seriously considers staff suggestions for improving patient safety.	B1	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
2. My supervisor, manager, or clinical leader wants us to work faster during busy times, even if it means taking shortcuts.	B2	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
3. My supervisor, manager, or clinical leader takes action to address patient safety concerns that are brought to their attention.	B3	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

SECTION C: Communication

Survey Question	Variable Name	Response Values
1. We are informed about errors that happen in this unit.	C1	1 = Never 2 = Rarely 3 = Sometimes 4 = Most of the time 5 = Always 9 = Does Not Apply or Don't Know blank = MISSING
2. When errors happen in this unit, we discuss ways to prevent them from happening again.	C2	1 = Never 2 = Rarely 3 = Sometimes 4 = Most of the time 5 = Always 9 = Does Not Apply or Don't Know blank = MISSING
3. In this unit, we are informed about changes that are made based on event reports.	C3	1 = Never 2 = Rarely 3 = Sometimes 4 = Most of the time 5 = Always 9 = Does Not Apply or Don't Know blank = MISSING
4. In this unit, staff speak up if they see something that may negatively affect patient care.	C4	1 = Never 2 = Rarely 3 = Sometimes 4 = Most of the time 5 = Always 9 = Does Not Apply or Don't Know blank = MISSING
5. When staff in this unit see someone with more authority doing something unsafe for patients, they speak up.	C5	1 = Never 2 = Rarely 3 = Sometimes 4 = Most of the time 5 = Always 9 = Does Not Apply or Don't Know blank = MISSING

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

Survey Question	Variable Name	Response Values
6. When staff in this unit speak up, those with more authority are open to their patient safety concerns.	C6	1 = Never 2 = Rarely 3 = Sometimes 4 = Most of the time 5 = Always 9 = Does Not Apply or Don't Know blank = MISSING
7. In this unit, staff are afraid to ask questions when something does not seem right.	C7	1 = Never 2 = Rarely 3 = Sometimes 4 = Most of the time 5 = Always 9 = Does Not Apply or Don't Know blank = MISSING

SECTION D: Reporting Patient Safety Events

Survey Question	Variable Name	Response Values
1. When a mistake is <u>caught and corrected before reaching the patient</u> , how often is this reported?	D1	1 = Never 2 = Rarely 3 = Sometimes 4 = Most of the time 5 = Always 9 = Does Not Apply or Don't Know blank = MISSING
2. When a mistake reaches the patient and <u>could have harmed the patient, but did not</u> , how often is this reported?	D2	1 = Never 2 = Rarely 3 = Sometimes 4 = Most of the time 5 = Always 9 = Does Not Apply or Don't Know blank = MISSING
3. <u>In the past 12 months</u> , how many patients' safety events have <u>you</u> reported?	D3	a = None b = 1 to 2 c = 3 to 5 d = 6 to 10 e = 11 or more blank = MISSING

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

SECTION E: Patient Safety Rating

Survey Question	Variable Name	Response Values
1. How would you rate your unit/work area on patient safety?	E1	1 = Poor 2 = Fair 3 = Good 4 = Very Good 5 = Excellent blank = MISSING

SECTION F: Your Hospital

Survey Question	Variable Name	Response Values
1. The actions of hospital management show that patient safety is a top priority	F1	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
2. Hospital management provides adequate resources to improve patient safety	F2	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
3. Hospital management seems interested in patient safety only after an adverse event happens	F3	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
4. When transferring patients from one unit to another, important information is often left out.	F4	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

Survey Question	Variable Name	Response Values
5. During shift changes, important patient care information is often left out	F5	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING
6. During shift changes, there is adequate time to exchange all key patient care information	F6	1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree 9 = Does Not Apply or Don't Know blank = MISSING

Care

Excluding privacy preferences and service limitations, what is the likelihood that you would seek care for yourself or for your family at this facility?

Very Unlikely	Unlikely	Somewhat Likely	Likely	Very Likely
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

Excluding privacy preferences and service limitations, what is the likelihood that you would seek care for yourself or for your family in your specific unit or work area?

Very Unlikely	Unlikely	Somewhat Likely	Likely	Very Likely
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

Background Questions

Survey Question	Variable Name	Response Values
1. How long have you worked in this <u>hospital</u> ?	G1	a = Less than 1 year b = 1 to 5 years c = 6 to 10 years d = 11 or more years blank = MISSING
2. In this hospital, how long have you worked in your current <u>unit/work area</u> ?	G2	a = Less than 1 year b = 1 to 5 years c = 6 to 10 years d = 11 or more years blank = MISSING
3. Typically, how many hours per week do you work in this <u>hospital</u> ?	G3	a = Less than 30 hours per week b = 30 to 40 hours per week c = More than 40 hours per week blank = MISSING
4. In your staff position, do you typically have direct interaction or contact with patients?	G4	a = YES, I typically have direct interaction or contact with patients b = NO, I typically do NOT have direct interaction or contact with patients blank = MISSING
TEXT FOR YOUR COMMENTS		

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

INSTRUCTIONS:

Step 1: After the survey has been administered the data must be compiled on the PSCS Data Entry Tool for Hospitals and exported into a CSV file.

The designated facility personnel or POC will have previously completed registration into the PSCS System located at:

<https://ahca.myflorida.com/schs/committeescouncils/indexpscs.shtml>.

(Successful PSCS System registration may take up to 3 business days. If you have not received an approval email within 3 business days, please email: PSCS@ahca.myflorida.com)

Step 2: Upon successful registration into the PSCS system, the POC will receive a confirmation email. A link to submit the survey when they are ready to on behalf of the facility will be included in the email.

Step 3: The designated facility personnel or POC will be prompted to select and upload the CSV file to the PSCS System.

NOTE: The PSCS System will only accept a CSV file type. Your facility survey submission may fail if:

- An incorrect, modified, or tool with missing columns has been used to create the CSV file.
- No responses have been compiled in the data entry tool.

Step 4: Upon final submission of the facility survey, the designated facility personnel or POC will receive email confirmation that the submission has been accepted into the PSCS System. (If you have not received a conformation email within 3 business days, please email: PSCS@ahca.myflorida.com.)

Hospital Patient Safety Culture Survey Data Entry Guide and Data File Specifications

This guide was derived from the Agency for Healthcare Research and Quality's (AHRQ), Hospital Survey on Patient Safety Culture Version 2.0: 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.

Sorra J, Yount N, Famolaro T, et al. AHRQ Hospital Survey on Patient Safety Culture Version 2.0: User's Guide. (Prepared by Westat, under Contract No. HHSP233201500026I/HHSP23337004T). Rockville, MD: Agency for Healthcare Research and Quality; June 2021. AHRQ Publication No. 19(21)-0076.
<https://www.ahrq.gov/sops/surveys/hospital/index.html>.