

How to Use the AHRQ SOPS® Ambulatory Surgery Center Survey to Improve Patient Safety

Webcast

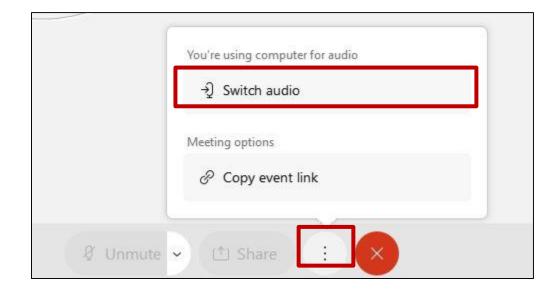
January 21, 2021

2:00-3:00 PM ET

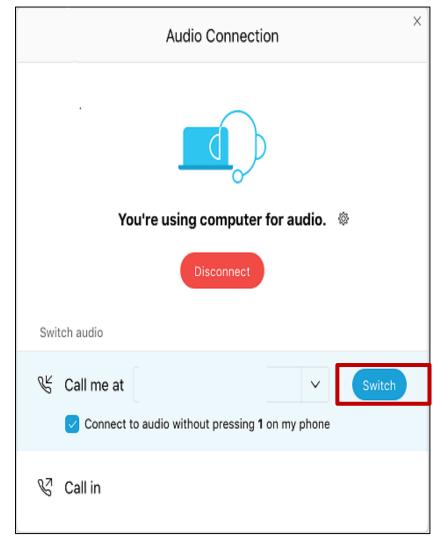
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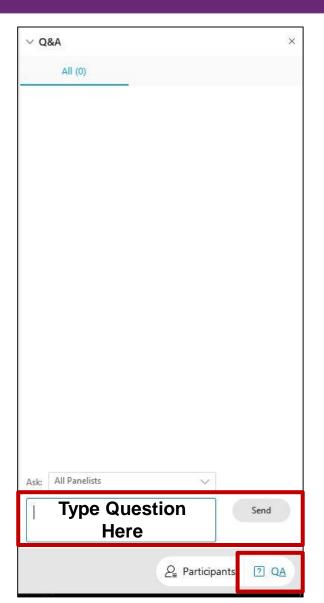
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How to Ask a Question



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 - Type question in the box that opens
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Today's Speakers





Caren Ginsberg, Ph.D.
Center for Quality Improvement and Patient Safety
Agency for Healthcare Research and Quality (AHRQ)



Lisa Sinsel, M.S.N., R.N Senior Director, Clinical Services Surgical Care Affiliates



Theresa Famolaro, M.P.S., M.S., M.B.A.
Senior Study Director,
User Network for the AHRQ Surveys on Patient Safety Culture (SOPS)
Westat



Joann Sorra, Ph.D., (Moderator)
Senior Study Director,
User Network for the AHRQ Surveys on Patient Safety Culture (SOPS)
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Agenda



- Overview of AHRQ's Patient Safety Priorities and Programs
- Using the SOPS ASC Survey to Improve Patient Safety
- SOPS ASC Database and Resources

Questions and Answers



Overview of AHRQ's Patient Safety Priorities and Programs

Caren Ginsberg, Ph.D.

Center for Quality Improvement and Patient Safety Agency for Healthcare Research and Quality (AHRQ)

AHRQ's Core Competencies



AHRQ is a research and science-based agency of the U.S. Department of Health and Human Services that supports evidence-based practices, and develops tools to measure progress and improve care.

- Health Systems Research: Invest in research and evidence to make health care safer and improve quality.
- Practice Improvement: Create tools for health care professionals to improve care for their patients.
- Data & Analytics: Generate measures and data to track and improve performance, and evaluate progress of the US health care system.

AHRQ Patient Safety Priorities



- Focus on areas of greatest impact
- Extend patient safety improvement to all settings
- Prevent HAIs, reduce antibiotic resistance
- Build capacity in the health care system to accelerate safety improvements
- Improve communication and engagement between clinicians and patients
- Make the safe thing the easy thing to do

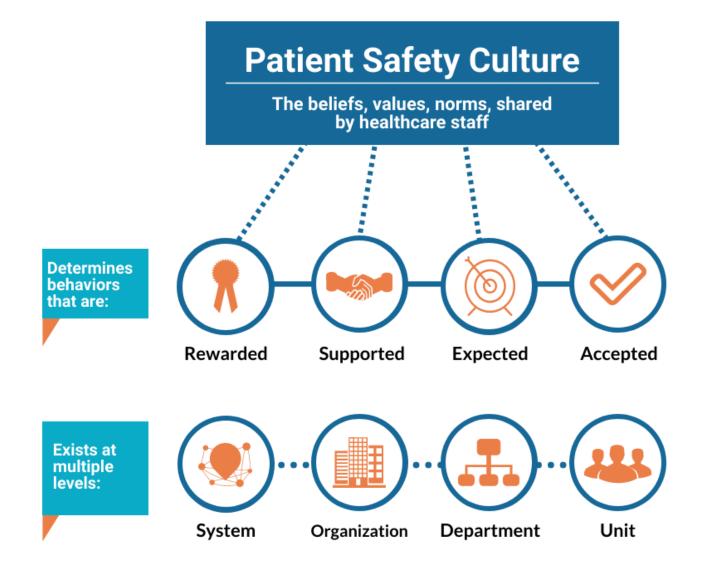
AHRQ's SOPS Program



- Initiated and funded by AHRQ since 2001
- Develops survey measures that are validated and use best methods for development and testing
- Advances the understanding, measurement, and improvement of patient safety culture within healthcare settings
- Conducts research to further...
 - the measurement and understanding of patient safety culture
 - the collection of data and informative reporting of patient safety culture data
 - patient safety improvement involving SOPS

What is Patient Safety Culture?





ASC SOPS Survey Patient Safety Culture Composite Measures



27 items assess 8 composite measures

- 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



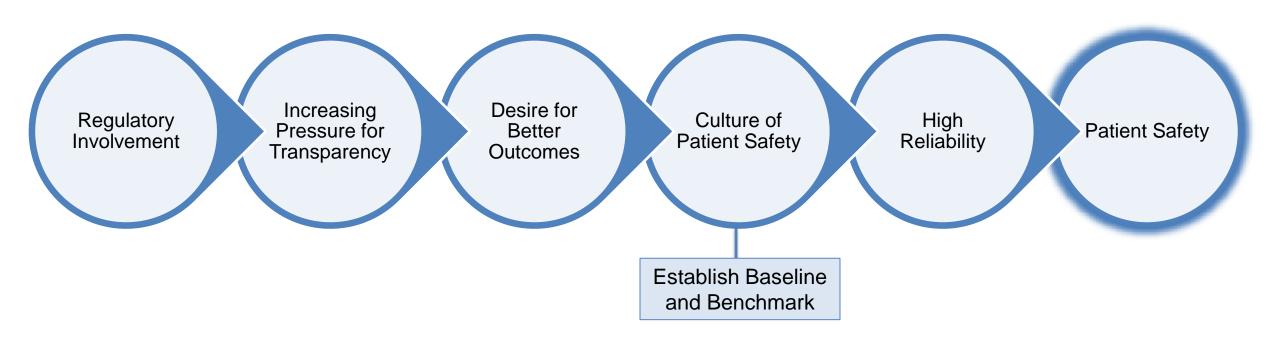
Using the SOPS ASC Survey to Improve Patient Safety

Lisa Sinsel, M.S.N., R.N.

Senior Director, Clinical Services Surgical Care Affiliates

Why Assess the Culture of Patient Safety?





How did we begin?



- 1. Reviewed EB Literature and AHRQ Resources
- 2. Educated and Sought Support from Leadership
- 3. Partnered with Experienced 3rd Party Survey Vendor
- 4. Established SOPS Survey Taskforce
- 5. Chose to Deploy Surveys by Email to Participants
- 6. Decided to Submit Data to the AHRQ Database to Benchmark
- 7. Developed Survey Timeline

Survey Activity Timeline





ASC SOPS Survey Results











Developed Dashboards



Compared with Other Data



Deployed Focused Actions

Lessons Learned



Successes

- Improved Results
- Gained Experience
- Vendor Engagement & Support
- Ability to Submit Data to AHRQ Database
- Ability to Conduct a Deeper Analysis
- Progress Towards High Reliability

Challenges

- Accurate Contact Information
- Determining Ideal Timing of Survey
- Supporting Participants with Email Access
- Focus on All Actions vs. Vital Few Actions
- Provide Action Plan Training
- Availability of ASC Specific Tools & Resources

Next Steps



- Administering 3rd Annual Survey May 2021
 - Plan to Submit Data to the AHRQ Database
 - Evaluate Performance & Celebrate Success
- ASC Industry Opportunities
 - More Work in this Space Needed
 - Baseline Measurements, Benchmarking,
 Developing New EBP for ASC Community



Contact Information



Lisa Sinsel, MSN, RN Contact Info

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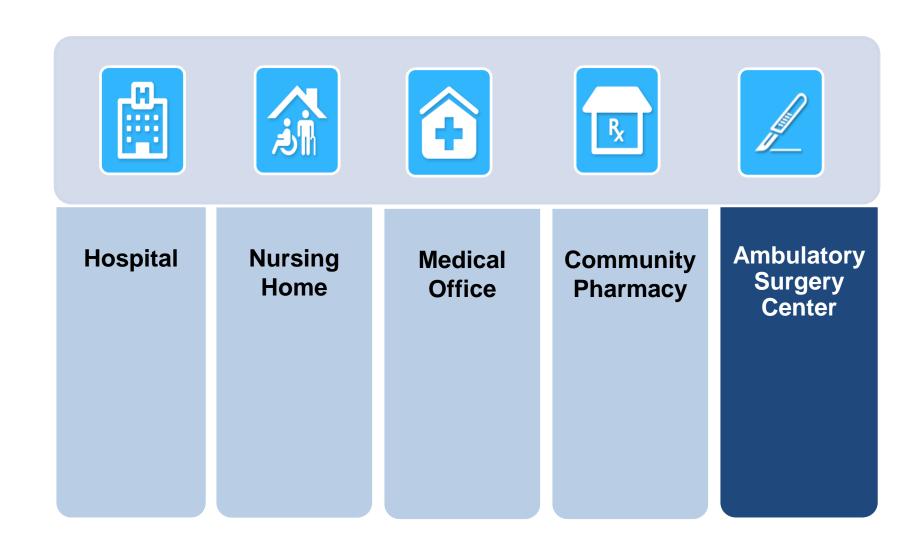
SOPS ASC Database and Resources

Theresa Famolaro, MPS, MS, MBA

Senior Study Director
User Network for the AHRQ Surveys on Patient Safety Culture (SOPS)
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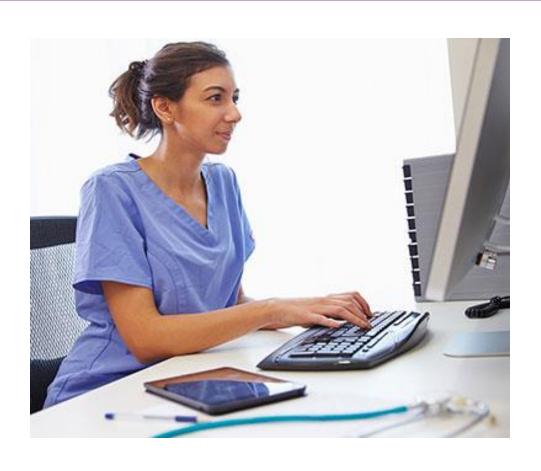
SOPS Databases





SOPS ASC Database





- Repository of SOPS ASC Survey Data
- Allows ASCs to compare their survey results to other participating ASCs
- Results are de-identified

2020 SOPS ASC Database



Released January 2020





2020 Participating ASCs and Respondents



ASCs



37% of ASCs had 4 to 5 rooms



77% of ASCs were multispecialty

Respondents



35% of respondents were nurses



44% of respondents worked 32-40 hours in their ASC

2020 SOPS ASC Database Composite Measure Results



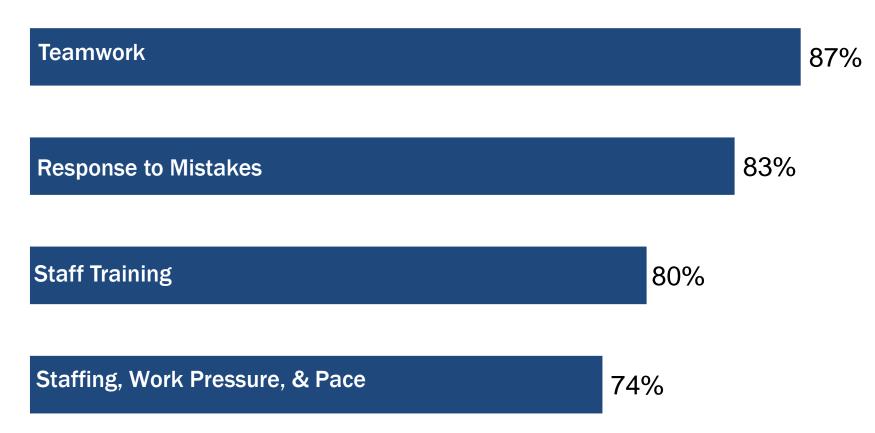
■ Average % Positive Response

Organizational Learning–Continuous Improvement	92%
Communication About Patient Information	89%
Management Support for Patient Safety	89%
Communication Openness	87%

2020 SOPS ASC Database Composite Measure Results



■ Average % Positive Response



Highest Composite Measure Items



Average % Positive Response



95% Important patient care information is clearly communicated across areas in this facility (A1)



94% We share key information about patients as soon as it becomes available (A7)

94% We feel comfortable asking questions when something doesn't seem right (A2)

Lowest Composite Measure Items



Average % Positive Response



73% Staff do not feel pressured to do tasks they haven't been trained to do (B3)

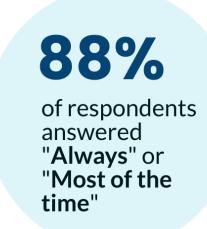


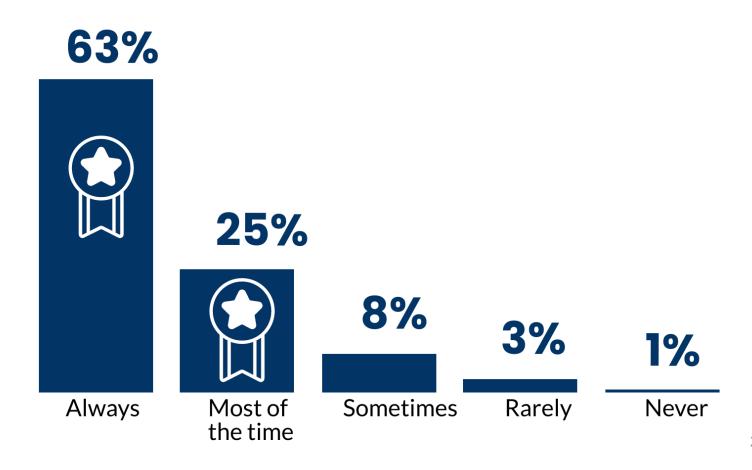
53% We <u>do not</u> feel rushed when taking care of patients (A10)

Near-Miss Documentation



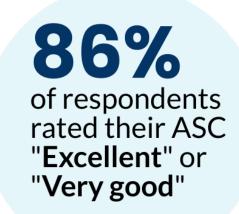
When something happens that could harm the patient, but does not, how often is it documented?

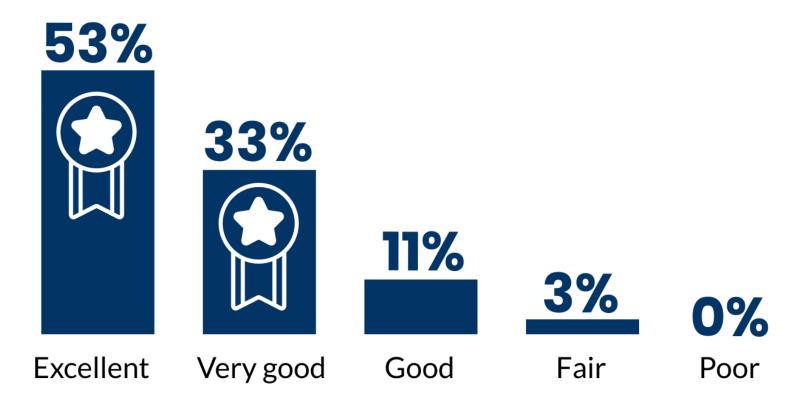




Overall Rating on Patient Safety







Communication in the Surgery/ Procedure Room





93%

Average % Positive Response

Before the start of procedures, team members stopped to discuss the overall plan (G1)



71%

Before the start of procedures, the doctor encouraged team members to speak up at any time (G2)



76%

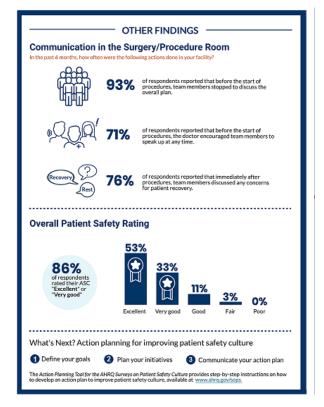
Immediately after procedures, team members discussed any concerns for patient recovery (G3)

Why Participate in the ASC SOPS Database?



 AHRQ produces a Database Report and Infographic that displays aggregated results from all participating sites



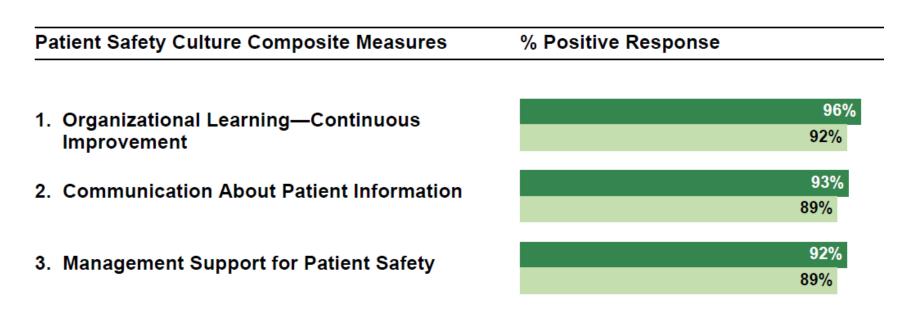


Why Participate in the ASC SOPS Database?



 Each participating ASC receives a free feedback report comparing their results to the Database

Sample Feedback Report Graphs



When to Submit Data in 2021



SOPS ASC Database Submission is open

June 1 – June 21, 2021



Eligible ASCs

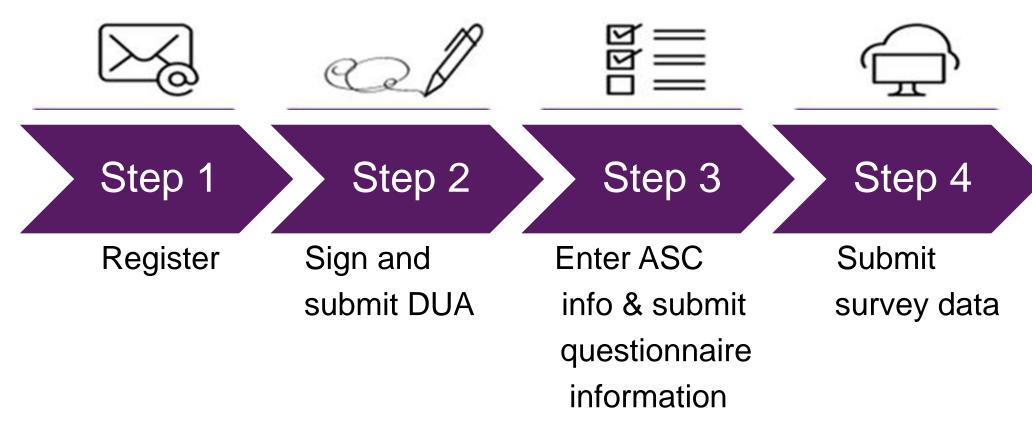


- Are CMS-certified and approved ASCs with a valid CMS Certification Number (CCN)
- Provide surgical/procedural services to patients that do not require hospitalization (except in unusual circumstances)
- <u>Do not</u> share space with a hospital or hospital outpatient surgery department

SOPS ASC Data Submission Process

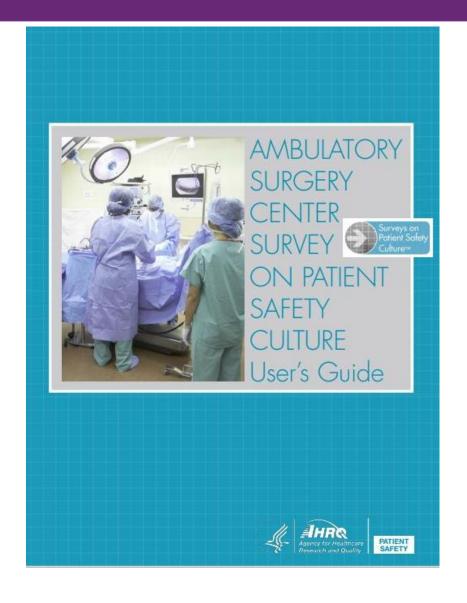


The SOPS ASC Database Online Submission System will open in June 2021.
 Organizations interested in submitting data complete four easy steps:



ASC SOPS Survey User's Guide





How to Administer the Survey

- Getting started
- Conducting paper, web or mixed-mode surveys
- Optimizing response rates
- Analyzing data and producing reports

Data Collection





- Can be web-based or paper
 - ▶ 75% of 2020 SOPS ASC Database facilities use web
- Can hire a vendor or do the work inhouse
- 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

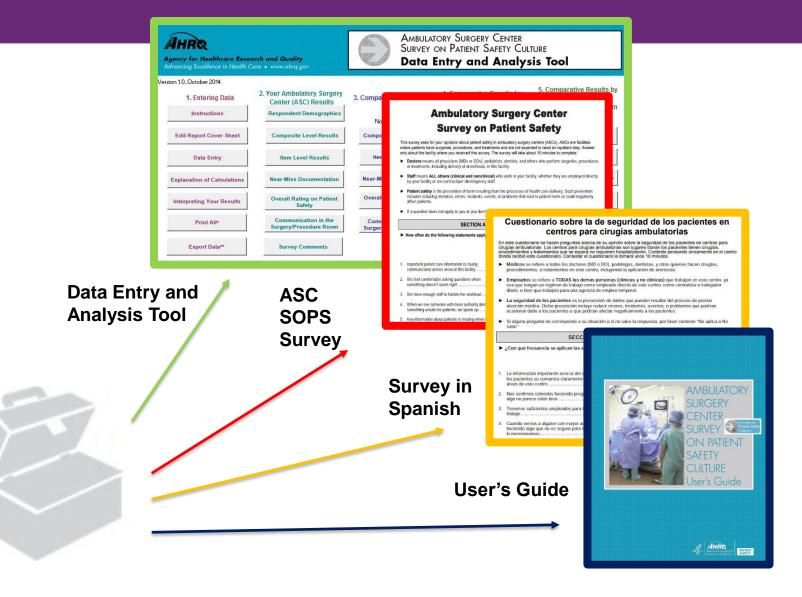
Survey Administration Timeline



Tasks	Prep/ Planning	Week 1	Week 2	Week 3	Week 4	Weeks 5 / 6
Determine resources and scope	٧					
Establish an ASC point of contact	٧					
Decide whether to use an outside vendor	٧					
Prepare survey materials (paper or web)		٧				
Promote the survey			٧	٧	٧	V
Send first survey invitation				٧		
Send weekly reminders					٧	٧
Close out data collection						٧

ASC SOPS Toolkit Materials





ASC SOPS Improvement Resources



Action Planning Tool

	Action Plan for the AHRQ Surveys on Patient Safety Culture						
Date	ility Name: e last updated: fining Your Goals and Selecting Your Initiative	Page I					
1	What areas do you want to focus on for improvement?						
2	What are your goals?						
3	What initiative will you implement?						
Not	otes or Comments						

ASC Resource List

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-checklist

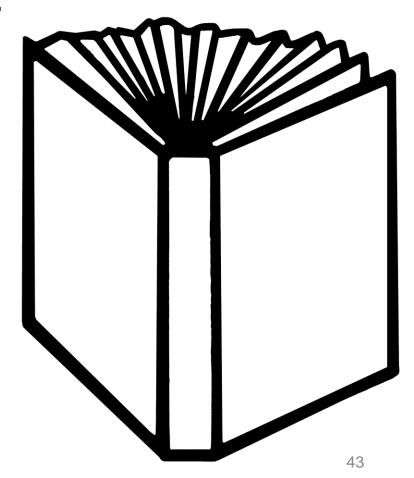
The Association of periOperative Registered Nurses (AORN) Comprehensive Surgical Checklist was created to support a facility's need to use a single checklist that includes the safety checks outlined in the World Health Organization's (WHO) Surgical Safety Checklist, while also using the safety checks 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 Atul Gawande, M.D., M.P.H., and representatives from The Joint Commission.

SOPS Bibliography



Published articles organized by topics:

- Patient safety culture improvement
- Linking culture to outcomes
- Analyzing measures within the survey
- Psychometric characteristics of the SOPS surveys
- International studies



SOPS Technical Assistance (TA)





E-mail:

DatabasesOnSafetyCulture@westat.com



Phone:

1-888-324-9790

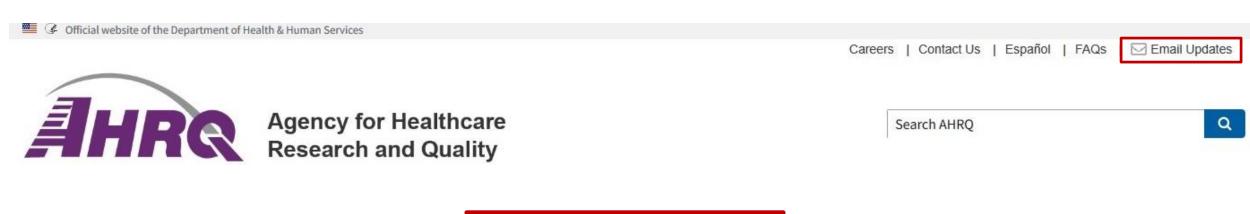


Website: www.ahrq.gov/sops

SOPS Updates



Sign up for email updates



☑ Surveys on Patient Safety Culture ()
 ☑ Hospital Survey ()
 ☑ Medical Office Survey
 ☑ Nursing Home Survey ()
 ☑ Ambulatory Surgery Center Survey
 ☑ Community Pharmacy Survey ()

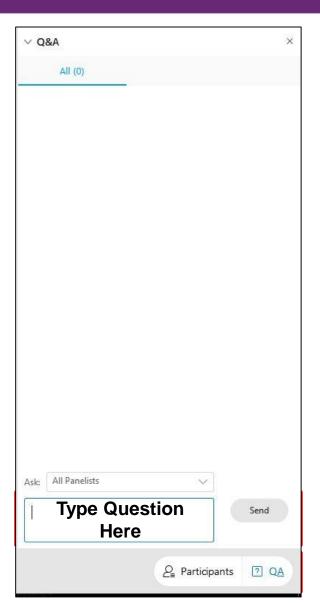


Questions & Answers

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