### Surveys on Patient Safety Culture<sup>™</sup> (SOPS<sup>™</sup>) Ambulatory Surgery Center Survey: 2020 User Database Report

#### Part II

## Appendix A—Overall Results by Facility Characteristics

## **Appendix B—Overall Results by Respondent Characteristics**

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### **Table of Contents**

Section	Page
Executive Summary	1
Part II—Appendixes A and B: Overall Results by Facility and Respondent Characteristics	1
Appendix A: Overall Results by Facility Characteristics	4
(1) Number of Operating/Procedure Rooms	
Appendix B: Overall Results by Respondent Characteristics	
(1) Staff Position	20
(2) Hours Worked Per Week	29



### **List of Tables**

Table		Page
Table A-1.	Composite Measure Average Percent Positive Response by Number of	
	Operating/Procedure Rooms – 2020 SOPS ASC Database	5
Table A-2.	Item Average Percent Positive Response by Number of	
	Operating/Procedure Rooms – 2020 SOPS ASC Database	6
Table A-3.	Item Average Percentages for Near-Miss Documentation by Number of	
	Operating/Procedure Rooms – 2020 SOPS ASC Database	9
Table A-4.	Average Percentage of Respondents Giving Their Ambulatory Surgery	
	Center an Overall Rating on Patient Safety by Number of	
	Operating/Procedure Rooms – 2020 SOPS ASC Database	10
Table A-5.	Item Average Percent Positive Response for Communication in the	
	Surgery/Procedure Room by Number of Operating/Procedure Rooms –	
	2020 SOPS ASC Database	11
Table A-6.	Composite Measure Average Percent Positive Response by Geographic	
	Region – 2020 SOPS ASC Database	13
Table A-7.	Item Average Percent Positive Response by Geographic Region – 2020	
	SOPS ASC Database	14
Table A-8.	Item Average Percentages for Near-Miss Documentation by Geographic	
	Region – 2020 SOPS ASC Database	17
Table A-9.	Average Percentage of Respondents Giving Their Ambulatory Surgery	
	Center an Overall Rating on Patient Safety by Geographic Region –	
	2020 SOPS ASC Database	18
Table A-10.	Item Average Percent Positive Response for Communication in the	
	Surgery/Procedure Room by Geographic Region – 2020 SOPS ASC	
	Database	19
Table B-1.	Composite Measure Average Percent Positive Response by Staff	
	Position - 2020 SOPS ASC Database	21
Table B-2.	Item Average Percent Positive Response by Staff Position – 2020 SOPS	
	ASC Database	22
Table B-3.	Item Average Percentages for Near-Miss Documentation by Staff	
	Position – 2020 SOPS ASC Database	26
Table B-4.	Average Percentage of Respondents Giving Their Ambulatory Surgery	
	Center an Overall Rating on Patient Safety by Staff Position – 2020	
	SOPS ASC Database	27
Table B-5.	Item Average Percent Positive Response for Communication in the	•
	Surgery/Procedure Room by Staff Position – 2020 SOPS ASC Database	28
Table B-6.	Composite Measure Average Percent Positive Response by Hours	
	Worked Per Week - 2020 SOPS ASC Database	30



2020 SOPS ASC Database	
Table B-8. Item Average Percentages for Near-Miss Documentation by Hours	31
Worked Per Week – 2020 SOPS ASC Database	34
Table B-9. Average Percentage of Respondents Giving Their Ambulatory Surgery	
Center an Overall Rating on Patient Safety by Hours Worked Per Week	
– 2020 SOPS ASC Database	35
Table B-10. Item Average Percentages for Documenting Mistakes by Hours Worked	
Per Week – 2020 SOPS ASC Database	36

### **Executive Summary**

### Part II—Appendixes A and B: Overall Results by Facility and Respondent Characteristics

The tables in Appendixes A and B provide average percent positive scores on the survey composite measures and items for the database ambulatory surgery centers (ASCs). The scores are broken down by the following ASC and respondent characteristics.

#### Appendix A: Overall Results by Facility Characteristics

- Number of Operating/Procedure Rooms
- Geographic Region

#### Appendix B: Overall Results by Respondent Characteristics

- Staff Position
- Hours Worked per Week

Highlights from these results by facility and respondent characteristics are presented at the end of the main report and are also shown at the end of this Executive Summary. Highlights were based on results for the eight patient safety culture composite measures, a single question about near-miss documentation, the overall patient safety rating, and questions about communication in the surgery/procedure room. The bottom row of the composite measure tables shows the composite measure average as a summary statistic for comparing breakout categories.

#### **Data Limitations**

This report has the following limitations:

- The database for the 2020 report includes only 282 ASCs, which represent less than 5 percent of the total number of ASCs in the United States.
- The average percent positive scores on the survey's composite measures are much higher
  for ASCs participating in the 2020 database compared with patient safety culture results
  presented in similar SOPS Database reports for hospitals and nursing homes.

#### **Comparing Your Results**

You can compare your ASC's percent positive scores on the patient safety culture composite measures and items with the averages shown in Appendix A for ASCs with the same average number of operating/procedure rooms or geographic region.

To compare your ASC's results with the data in Appendix B, your ASC will have to compute percent positive scores on the patient safety culture composite measures and items broken down by staff position or hours worked per week.

#### Highlights From Appendix A: Overall Results by Facility Characteristics

#### Number of Operating/ Procedure Rooms (Tables A-1, A-5)

- There were small differences on the Composite Measure Average by number of operating/procedure rooms.
- ASCs with *3 operating/procedure rooms* had the highest average percent positive response for the item "Immediately after procedures, team members discussed any concerns for patient recovery" (80 percent); ASCs with *6 or more operating/procedure rooms* were the least positive for this item (72 percent).

#### Geographic Region (Tables A-6, A-8, A-10)

- There were small differences on the Composite Measure Average by geographic region.
- ASCs from the *South* and *West* geographic regions had the highest average percentage of
  respondents who indicated that near-miss incidents were "Always" or "Most of the time"
  documented in an incident or occurrence report (90 percent each); ASCs from the *Midwest*region had the lowest (83 percent).
- ASCs from the *Northeast* had the highest average percent positive response for the item "Immediately after procedures, team members discussed any concerns for patient recovery" (81 percent); ASCs from the *Midwest* were the least positive for this item (73 percent).



#### Highlights From Appendix B: Overall Results by Respondent Characteristics

#### Staff Position (Tables B-1, B-3, B-4, B-5)

- Doctors/Physicians (excluding Anesthesiologists) or Surgeons had the highest score on the Composite Measure Average (96 percent); Technicians had the lowest (80 percent).
- Physician Assistants or Nurse Practitioners had the highest average percentage of respondents who indicated that near-miss incidents were "Always" or "Most of the time" documented in an incident or occurrence report (98 percent); Certified Registered Nurse Anesthetists (CRNAs) had the lowest (83 percent each).
- Doctors/Physicians (excluding Anesthesiologists) or Surgeons had the highest average percentage of respondents who gave their ASC an Overall Rating on Patient Safety of "Excellent" or "Very good" (96 percent); Nurses had the lowest (80 percent).
- Doctors/Physicians (excluding Anesthesiologists) or Surgeons and Administrative, Clerical, or Business Staff had the highest average percent positive response for the item "Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns" (85 percent); Nurses were the least positive for this item (58 percent).

#### Hours Worked Per Week (Tables B-6, B-8, B-9, B-10)

- Respondents who typically work 1 to 16 hours per week had the highest score for the Composite Measure Average (92 percent); respondents who typically work 32 to 40 hours per week had the lowest (81 percent).
- Respondents who typically work 1 to 16 hours per week had the highest average percentage of respondents who indicated that near-miss incidents were "Always" or "Most of the time" documented in an incident or occurrence report (92 percent); Respondents who typically work 17 to 31 hours per week or 32 to 40 hours per week had the lowest (87 percent each).
- Respondents who typically work *1 to 16 hours per week* had the highest percentage of respondents who gave their ASC an Overall Rating on Patient Safety of "Excellent" or "Very good" (93 percent); Respondents who typically work *32 to 40 hours per week* had the lowest (82 percent).
- Respondents who typically work *1 to 16 hours per week* had the highest average percent positive response for the item "Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns" (80 percent); respondents who typically work *32 to 40 hours per week* were the least positive for this item (62 percent).



### Part II

# Appendix A: Overall Results by Facility Characteristics

### (1) Number of Operating/Procedure Rooms

**Note:** Each table shows the number of ASCs and respondents by number of operating/procedure rooms. However, the precise number of ASCs and respondents corresponding to each data cell in a table will vary because of individual nonresponse/missing data.



Table A-1. Composite Measure Average Percent Positive Response by Number of Operating/Procedure Rooms – 2020 SOPS ASC Database

		Number of Operating/Procedure Rooms			
	Patient Safety Culture Composite Measures	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms
	# ASCs	42	51	105	84
	# Respondents	735	1,357	3,871	4,564
1.	Organizational Learning – Continuous Improvement	93%	92%	91%	91%
2.	Communication About Patient Information	90%	89%	89%	89%
3.	Management Support for Patient Safety	90%	90%	89%	87%
4.	Communication Openness	90%	87%	88%	86%
5.	Teamwork	88%	87%	87%	85%
6.	Response to Mistakes	85%	83%	83%	81%
7.	Staff Training	82%	80%	81%	78%
8.	Staffing, Work Pressure, and Pace	78%	74%	74%	70%
	Composite Measure Average	87%	85%	85%	83%

Table A-2. Item Average Percent Positive Response by Number of Operating/Procedure Rooms – 2020 SOPS ASC Database (Page 1 of 3)

			Number of Opera	ting/Procedure Roo	ms
ı	Survey Items By Composite Measure	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms
	# ASCs	42	51	105	84
	# Respondents	735	1,357	3,871	4,564
1.	Organizational Learning – Continuous Improvement				
1.	This facility actively looks for ways to improve patient safety. (C1)	92%	94%	92%	93%
2.	We make improvements when someone points out patient safety problems. (C3)	94%	94%	92%	91%
3.	We are good at changing processes to make sure the same patient safety problems don't happen again. (C6)	94%	89%	90%	89%
2.	Communication About Patient Information				
1.	Important patient care information is clearly communicated across areas in this facility. (A1)	96%	94%	95%	94%
2.	Key information about patients is missing when it is needed. (A5R)	75%	73%	75%	74%
3.	We share key information about patients as soon as it becomes available. (A7)	95%	94%	93%	94%
4.	Within this facility, we do a good job communicating information that affects patient care. (A9)	94%	93%	94%	93%
3.	Management Support for Patient Safety				
1.	Managers encourage everyone to suggest ways to improve patient safety. (E1)	90%	90%	89%	88%
2.	Management examines near-miss events that could have harmed patients but did not. (E2)	90%	91%	88%	88%
3.	Management provides adequate resources to improve patient safety. (E3)	89%	90%	89%	86%



Table A-2. Item Average Percent Positive Response by Number of Operating/Procedure Rooms – 2020 SOPS ASC Database (Page 2 of 3)

		١	Number of Operat	ting/Procedure Rooi	ms
	Survey Items By Composite Measure	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms
	# ASCs	42	51	105	84
	# Respondents	735	1,357	3,871	4,564
5.	Communication Openness				
1.	We feel comfortable asking questions when something doesn't seem right. (A2)	96%	93%	94%	93%
2.	When we see someone with more authority doing something unsafe for patients, we speak up. (A4)	90%	90%	91%	89%
3.	Our ideas and suggestions are valued in this facility. (A6)	83%	79%	78%	76%
4.	Teamwork				
1.	When someone in this facility gets really busy, others help out. (B1)	90%	91%	90%	89%
2.	Doctors and staff clearly understand each other's roles and responsibilities. (B4)	89%	88%	89%	87%
3.	Our facility allows disrespectful behavior by those working here. (B6R)	79%	79%	77%	74%
4.	We work together as an effective team. (B8)	92%	91%	91%	90%
6.	Response to Mistakes				
1.	Staff are treated fairly when they make mistakes. (C2)	85%	82%	82%	80%
2.	Learning, rather than blame, is emphasized when mistakes are made. (C4)	81%	81%	81%	79%
3.	Staff are told about patient safety problems that happen in this facility. (C5)	88%	86%	87%	85%

Table A-2. Item Average Percent Positive Response by Number of Operating/Procedure Rooms – 2020 SOPS ASC Database (Page 3 of 3)

		N	umber of Operatin	g/Procedure Room	s
	Survey Items by Composite Measure	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms
	# ASCs	42	51	105	84
	# Respondents	735	1,357	3,871	4,564
7.	Staff Training				
1.	Staff who are new to this facility receive adequate orientation. (B2)	85%	80%	82%	80%
2.	Staff feel pressured to do tasks they haven't been trained to do. (B3R)	74%	76%	74%	70%
3.	We get the on-the-job training we need in this facility. (B5)	86%	85%	85%	83%
4.	Staff get the refresher training they need. (B7)	81%	80%	81%	79%
8.	Staffing, Work Pressure, and Pace				
1.	We have enough staff to handle the workload. (A3)	87%	82%	83%	80%
2.	There is enough time between procedures to properly prepare for the next one (A8)	88%	85%	85%	82%
3.	We feel rushed when taking care of patients. (A10R)	58%	54%	53%	49%

Table A-3. Item Average Percentages for Near-Miss Documentation by Number of Operating/Procedure Rooms – 2020 SOPS ASC Database

	Number of Operating/Procedure Rooms					
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (D1)	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms		
# ASCs	42	51	105	84		
# Respondents	735	1,357	3,871	4,564		
Always or Most of the time	91%	89%	89%	87%		
Always	70%	63%	64%	59%		
Most of the time	20%	26%	25%	27%		
Sometimes	7%	7%	7%	9%		
Rarely	3%	3%	3%	3%		
Never	0%	1%	1%	1%		

Note: Percentages may not add to 100 due to rounding. In addition, "Always" and "Most of the time" may not add to the subtotal shown due to rounding.

Table A-4. Average Percentage of Respondents Giving Their Ambulatory Surgery Center an Overall Rating on Patient Safety by Number of Operating/Procedure Rooms – 2020 SOPS ASC Database

	Number of Operating/Procedure Rooms					
Overall Rating on Patient Safety (F1)	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms		
# ASCs	42	51	105	84		
# Respondents	735	1,357	3,871	4,564		
Excellent or Very good	86%	88%	86%	84%		
Excellent	54%	55%	54%	49%		
Very good	33%	33%	33%	35%		
Good	11%	9%	11%	12%		
Fair	2%	3%	3%	4%		
Poor	0%	0%	0%	0%		

Note: Percentages may not add to 100 due to rounding. In addition, "Excellent" and "Very good" may not add to the subtotal shown due to rounding.

Table A-5. Item Average Percent Positive Response for Communication in the Surgery/Procedure Room by Number of Operating/Procedure Rooms – 2020 SOPS ASC Database

		Number of Operating/Procedure Rooms			
Communication in the Surgery/Procedure Room		1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms
	# ASCs	42	51	105	84
	# Respondents	735	1,357	3,871	4,564
In the past 6 months, how often were the following actions done in your facility?					
1.	Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (G1)	92%	93%	94%	93%
2.	Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns. (G2)	73%	72%	73%	68%
3.	Immediately after procedures, team members discussed any concerns for patient recovery. (G3)	77%	80%	78%	72%

**Note:** (1) The item's survey location is shown after the item text. (2) The percent positive response shown is based on those who responded "Most of the time" or "Always." (3) Results only include those respondents who answered "Yes" to typically being in the surgery/procedure room during surgeries, procedures, or treatments.

# Appendix A: Overall Results by Facility Characteristics

#### (2) Geographic Region

**Note 1:** Each table shows the number of ASCs and respondents by geographic region. However, the precise number of ASCs and respondents corresponding to each data cell in a table will vary because of individual nonresponse/missing data.

Note 2: States are categorized into geographic regions as follows:

- Northeast: CT, MA, ME, NH, NJ, NY, PA, RI, VT
- Midwest: IL, IN, IA, KS, MI, MN, MO, ND, NE, OH, SD, WI
- South: AL, AR, DC, DE, FL, GA, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, WV
- West: AK, AZ, CA, CO, HI, ID, MT, NM, NV, OR, UT, WA, WY

Table A-6. Composite Measure Average Percent Positive Response by Geographic Region – 2020 SOPS ASC Database

		Geographic Region			
	Patient Safety Culture Composite Measures	Northeast	Midwest	South	West
	# ASCs	37	63	104	78
	# Respondents	1,335	2,172	4,133	2,887
1.	Organizational Learning – Continuous Improvement	91%	91%	92%	92%
2.	Communication About Patient Information	88%	89%	90%	89%
3.	Management Support for Patient Safety	88%	88%	90%	89%
4.	Communication Openness	84%	87%	88%	88%
5.	Teamwork	85%	85%	88%	87%
6.	Response to Mistakes	81%	82%	84%	83%
7.	Staff Training	78%	81%	81%	78%
8.	Staffing, Work Pressure, and Pace	73%	71%	74%	74%
	Composite Measure Average	84%	84%	86%	85%

Table A-7. Item Average Percent Positive Response by Geographic Region – 2020 SOPS ASC Database (Page 1 of 3)

			Geogra	phic Region	
	Survey Items by Composite Measure	Northeast	Midwest	South	West
	# ASCs	37	63	104	78
	# Respondents	1,335	2,172	4,133	2,887
1.	Organizational Learning – Continuous Improvement				
1.	This facility actively looks for ways to improve patient safety. (C1)	93%	92%	93%	92%
2.	We make improvements when someone points out patient safety problems. (C3)	91%	93%	93%	93%
3.	We are good at changing processes to make sure the same patient safety problems don't happen again. (C6)	89%	89%	91%	90%
2.	Communication About Patient Information				
1.	Important patient care information is clearly communicated across areas in this facility. (A1)	94%	95%	95%	95%
2.	Key information about patients is missing when it is needed.	73%	75%	76%	72%
3.	We share key information about patients as soon as it becomes available. (A7)	93%	94%	94%	94%
4.	Within this facility, we do a good job communicating information that affects patient care. (A9)	93%	93%	93%	94%
3.	Management Support for Patient Safety				
1.	Managers encourage everyone to suggest ways to improve patient safety. (E1)	88%	89%	89%	89%
2.	Management examines near-miss events that could have harmed patients but did not. (E2)	89%	87%	90%	89%
3.	Management provides adequate resources to improve patient safety. (E3)	87%	87%	90%	88%



Table A-7. Item Average Percent Positive Response by Geographic Region – 2020 SOPS ASC Database (Page 2 of 3)

			Geograp	hic Region	
	Survey Items by Composite Measure	Northeast	Midwest	South	West
	# ASCs	37	63	104	78
	# Respondents	1,335	2,172	4,133	2,887
4.	Communication Openness				
1.	We feel comfortable asking questions when something doesn't seem right. (A2)	91%	94%	94%	95%
2.	When we see someone with more authority doing something unsafe for patients, we speak up. (A4)	88%	89%	91%	90%
3.	Our ideas and suggestions are valued in this facility. (A6)	73%	78%	80%	80%
5.	Teamwork				
1.	When someone in this facility gets really busy, others help out.	90%	88%	91%	89%
2.	Doctors and staff clearly understand each other's roles and responsibilities. (B4)	87%	88%	89%	88%
3.	Our facility allows disrespectful behavior by those working here. (B6R)	73%	74%	78%	79%
4.	We work together as an effective team. (B8)	90%	90%	92%	91%
6.	Response to Mistakes				
1.	Staff are treated fairly when they make mistakes. (C2)	80%	81%	83%	82%
2.	Learning, rather than blame, is emphasized when mistakes are made. (C4)	77%	80%	82%	81%
3.	Staff are told about patient safety problems that happen in this facility. (C5)	87%	85%	87%	86%

Table A-7. Item Average Percent Positive Response by Geographic Region – 2020 SOPS ASC Database (Page 3 of 3)

			Geograp	ohic Region	
	Survey Items by Composite Measure	Northeast	Midwest	South	West
	# ASCs	37	63	104	78
	# Respondents	1,335	2,172	4,133	2,887
7.	Staff Training				
1.	Staff who are new to this facility receive adequate orientation. (B2)	81%	81%	83%	81%
2.	Staff feel pressured to do tasks they haven't been trained to do. (B3R)	71%	74%	74%	71%
3.	We get the on-the-job training we need in this facility. (B5)	81%	86%	85%	83%
4.	Staff get the refresher training they need. (B7)	79%	81%	83%	78%
8.	Staffing, Work Pressure, and Pace				
1.	We have enough staff to handle the workload. (A3)	82%	81%	84%	83%
2.	There is enough time between procedures to properly prepare for the next one. (A8)	85%	83%	85%	85%
3.	We feel rushed when taking care of patients. (A10R)	53%	48%	54%	55%

Table A-8. Item Average Percentages for Near-Miss Documentation by Geographic Region – 2020 SOPS ASC Database

		Geograp	hic Region	
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (D1)	Northeast	Midwest	South	West
# ASCs	37	63	104	78
# Respondents	1,335	2,172	4,133	2,887
Always or Most of the time	89%	83%	90%	90%
Always	63%	55%	68%	64%
Most of the time	27%	28%	22%	26%
Sometimes	6%	11%	7%	7%
Rarely	2%	5%	2%	3%
Never	2%	1%	1%	0%

Note: Percentages may not add to 100 due to rounding. In addition, "Always" and "Most of the time" may not add to the subtotal shown due to rounding.

Table A-9. Average Percentage of Respondents Giving Their Ambulatory Surgery Center an Overall Rating on Patient Safety by Geographic Region – 2020 SOPS ASC Database

		Geograp	hic Region	
Overall Rating on Patient Safety (F1)	Northeast	Midwest	South	West
# ASCs	37	63	104	78
# Respondents	1,335	2,172	4,133	2,887
Excellent or Very good	84%	85%	87%	86%
Excellent	52%	49%	55%	52%
Very good	32%	36%	32%	34%
Good	14%	11%	9%	11%
Fair	2%	3%	3%	3%
Poor	0%	0%	0%	0%

Note: Percentages may not add to 100 due to rounding. In addition, "Excellent" and "Very good" may not add to the subtotal shown due to rounding.

Table A-10. Item Average Percent Positive Response for Communication in the Surgery/Procedure Room by Geographic Region – 2020 SOPS ASC Database

			Geograph	ic Region	
Con	nmunication in the Surgery/Procedure Room	Northeast	Midwest	South	West
	# ASCs	37	63	104	78
	# Respondents	1,335	2,172	4,133	2,887
	he past 6 months, how often were the following actions done in ir facility?				
1.	Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (G1)	95%	93%	93%	92%
2.	Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns.  (G2)	74%	68%	73%	70%
3.	Immediately after procedures, team members discussed any concerns for patient recovery. (G3)	81%	73%	78%	75%

**Note:** (1) The item's survey location is shown after the item text. (2) The percent positive response shown is based on those who responded "Most of the time" or "Always." (3) Results only include those respondents who answered "Yes" to typically being in the surgery/procedure room during surgeries, procedures, or treatments.

# **Appendix B: Overall Results by Respondent Characteristics**

#### (1) Staff Position

**Note 1:** These breakout tables exclude ASCs that did not ask respondents to indicate their staff position. In addition, respondents who selected "Other" or who did not answer (missing) were not included.

**Note 2:** Each table shows the number of ASCs and respondents by staff position. The number of ASCs is based on whether ASCs asked respondents to indicate their staff position (not all ASCs asked this question). However, the precise number of ASCs and respondents corresponding to each data cell in the tables will vary because of individual nonresponse/missing data.

Table B-1. Composite Measure Average Percent Positive Response by Staff Position - 2020 SOPS ASC Database

					Staff	Position				
Pa	itient Safety Culture Composite Measures	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
	# ASCs	193	246	112	66	247	277	264	133	247
	# Respondents	762	2,076	340	129	697	3,582	1,166	238	1,125
1.	Organizational Learning – Continuous Improvement	93%	98%	90%	97%	97%	88%	91%	92%	93%
2.	Communication About Patient Information	94%	96%	89%	94%	93%	86%	86%	87%	88%
3.	Management Support for Patient Safety	91%	96%	86%	94%	96%	86%	87%	87%	90%
4.	Communication Openness	94%	97%	89%	94%	95%	83%	82%	83%	85%
5.	Teamwork	93%	97%	88%	92%	92%	84%	80%	78%	81%
6.	Response to Mistakes	89%	95%	79%	91%	94%	80%	76%	78%	77%
7.	Staff Training	87%	91%	79%	88%	90%	77%	72%	75%	76%
8.	Staffing, Work Pressure, and Pace	84%	94%	72%	88%	82%	62%	66%	68%	74%
	Composite Measure Average	91%	96%	84%	92%	92%	81%	80%	81%	83%

Table B-2. Item Average Percent Positive Response by Staff Position – 2020 SOPS ASC Database (Page 1 of 4)

					Staff Posit	tion				
	Survey Items by Composite Measure	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
	# ASCs	193	246	112	66	247	277	264	133	247
	# Respondents	762	2,076	340	129	697	3,582	1,166	238	1,125
1.	Organizational Learning – Continuous Improvement									
1.	This facility actively looks for ways to improve patient safety. (C1)	93%	98%	92%	99%	97%	89%	92%	94%	94%
2.	We make improvements when someone points out patient safety problems. (C3)	94%	98%	92%	96%	99%	90%	92%	94%	92%
3.	We are good at changing processes to make sure the same patient safety problems don't happen again. (C6)	91%	97%	87%	97%	96%	86%	90%	89%	92%
2.	Communication About Patient Information									
1.	Important patient care information is clearly communicated across areas in this facility. (A1)	97%	99%	93%	99%	98%	93%	93%	97%	95%
2.	Key information about patients is missing when it is needed. (A5R)	81%	88%	74%	80%	78%	68%	74%	70%	73%
3.	We share key information about patients as soon as it becomes available. (A7)	98%	99%	93%	98%	97%	93%	87%	91%	91%
4.	Within this facility, we do a good job communicating information that affects patient care. (A9)	98%	98%	95%	98%	98%	91%	91%	90%	94%



Table B-2. Item Average Percent Positive Response by Staff Position – 2020 SOPS ASC Database (Page 2 of 4)

					Staff Posi	tion				
	Survey Items by Composite Measure	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
	# ASCs	193	246	112	66	247	277	264	133	247
	# Respondents	762	2,076	340	129	697	3,582	1,166	238	1,125
3.	Management Support for Patient Safety									
1.	Managers encourage everyone to suggest ways to improve patient safety. (E1)	91%	96%	86%	95%	97%	86%	87%	88%	89%
2.	Management examines near-miss events that could have harmed patients but did not. (E2)	91%	95%	87%	95%	97%	87%	87%	86%	90%
3.	Management provides adequate resources to improve patient safety. (E3)	91%	97%	85%	91%	95%	84%	88%	87%	91%
4.	Communication Openness									
1.	We feel comfortable asking questions when something doesn't seem right. (A2)	99%	99%	96%	97%	98%	92%	90%	89%	92%
2.	When we see someone with more authority doing something unsafe for patients, we speak up. (A4)	94%	98%	92%	97%	93%	87%	87%	87%	87%
3.	Our ideas and suggestions are valued in this facility. (A6)	90%	95%	79%	87%	93%	71%	70%	74%	76%

Table B-2. Item Average Percent Positive Response by Staff Position – 2020 SOPS ASC Database (Page 3 of 4)

					Staff Posit	tion				
	Survey Items by Composite Measure	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
	# ASCs	193	246	112	66	247	277	264	133	247
	# Respondents	762	2,076	340	129	697	3,582	1,166	238	1,125
5.	Teamwork									
1.	When someone in this facility gets really busy, others help out. (B1)	93%	98%	91%	96%	95%	91%	80%	80%	83%
2.	Doctors and staff clearly understand each other's roles and responsibilities. (B4)	95%	98%	90%	94%	92%	85%	86%	82%	79%
3.	Our facility allows disrespectful behavior by those working here. (B6R)	87%	92%	76%	83%	87%	70%	68%	65%	74%
4.	We work together as an effective team. (B8)	98%	98%	94%	95%	95%	90%	85%	85%	87%
6.	Response to Mistakes									
1.	Staff are treated fairly when they make mistakes. (C2)	90%	96%	79%	86%	94%	79%	73%	76%	73%
2.	Learning, rather than blame, is emphasized when mistakes are made. (C4)	88%	95%	77%	93%	93%	77%	72%	75%	74%
3.	Staff are told about patient safety problems that happen in this facility. (C5)	90%	95%	82%	95%	96%	84%	84%	83%	85%

Table B-2. Item Average Percent Positive Response by Staff Position – 2020 SOPS ASC Database (Page 4 of 4)

					Staff Posit	tion				
	Survey Items by Composite Measure	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
	# ASCs	193	246	112	66	247	277	264	133	247
	# Respondents	762	2,076	340	129	697	3,582	1,166	238	1,125
7.	Staff Training									
1.	Staff who are new to this facility receive adequate orientation. (B2)	91%	92%	85%	89%	91%	77%	72%	78%	79%
2.	Staff feel pressured to do tasks they haven't been trained to do. (B3R)	81%	89%	66%	83%	85%	71%	61%	64%	62%
3.	We get the on-the-job training we need in this facility. (B5)	89%	92%	86%	95%	93%	82%	80%	79%	82%
4.	Staff get the refresher training they need. (B7)	85%	90%	78%	85%	89%	78%	74%	78%	79%
8.	Staffing, Work Pressure, and Pace									
1.	We have enough staff to handle the workload. (A3)	93%	96%	83%	93%	93%	78%	70%	78%	77%
2.	There is enough time between procedures to properly prepare for the next one. (A8)	94%	98%	85%	92%	96%	77%	77%	78%	87%
3.	We feel rushed when taking care of patients. (A10R)	66%	88%	49%	79%	56%	32%	50%	48%	59%

Table B-3. Item Average Percentages for Near-Miss Documentation by Staff Position – 2020 SOPS ASC Database

				Staff P	osition				
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (D1)	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
# ASCs	193	246	112	66	247	277	264	133	247
# Respondents	762	2,076	340	129	697	3,582	1,166	238	1,125
Always or Most of the time	88%	95%	83%	98%	93%	84%	91%	88%	95%
Always	59%	71%	53%	77%	65%	55%	72%	68%	83%
Most of the time	29%	24%	30%	21%	28%	29%	19%	20%	12%
Sometimes	9%	4%	14%	2%	5%	10%	7%	8%	3%
Rarely	3%	0%	2%	0%	2%	4%	2%	2%	1%
Never	0%	0%	1%	0%	0%	1%	1%	2%	0%

Note: Percentages may not add to 100 due to rounding. In addition, "Always" and "Most of the time" may not add to the subtotal shown due to rounding.

Table B-4. Average Percentage of Respondents Giving Their Ambulatory Surgery Center an Overall Rating on Patient Safety by Staff Position – 2020 SOPS ASC Database

				Staff P	osition				
Overall Rating on Patient Safety (F1)	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
# ASCs	193	246	112	66	247	277	264	133	247
# Respondents	762	2,076	340	129	697	3,582	1,166	238	1,125
Excellent or Very good	90%	96%	86%	93%	93%	80%	83%	82%	87%
Excellent	62%	76%	55%	67%	61%	42%	45%	44%	49%
Very good	28%	20%	31%	26%	31%	38%	38%	38%	38%
Good	7%	3%	13%	7%	6%	15%	13%	13%	11%
Fair	2%	1%	1%	0%	1%	4%	3%	4%	2%
Poor	0%	0%	0%	0%	0%	1%	0%	1%	1%

Note: Percentages may not add to 100 due to rounding. In addition, "Excellent" and "Very good" may not add to the subtotal shown due to rounding.

Table B-5. Item Average Percent Positive Response for Communication in the Surgery/Procedure Room by Staff Position – 2020 SOPS ASC Database

		Staff Position								
Cor	nmunication in the Surgery/Procedure Room	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
	# ASCs	193	246	112	66	247	277	264	133	247
	# Respondents	762	2,076	340	129	697	3,582	1,166	238	1,125
	he past 6 months, how often were the owing actions done in your facility?									
1.	Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (G1)	95%	99%	95%	97%	97%	90%	89%	89%	97%
2.	Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns. (G2)	70%	85%	69%	82%	72%	58%	68%	69%	85%
3.	Immediately after procedures, team members discussed any concerns for patient recovery. (G3)	76%	87%	72%	92%	86%	68%	69%	86%	94%

**Note:** (1) The item's survey location is shown after the item text. (2) The percent positive response shown is based on those who responded "Most of the time" or "Always." (3) Results only include those respondents who answered "Yes" to typically being in the surgery/procedure room during surgeries, procedures, or treatments.

# **Appendix B: Overall Results by Respondent Characteristics**

#### (2) Hours Worked Per Week

**Note 1:** These breakout tables exclude ASCs that did not ask respondents to indicate how many hours they worked per week in the ASC. In addition, respondents who did not answer (missing) were not included.

**Note 2:** Each table shows the number of ASCs and respondents by hours worked per week in the ASC. The number of ASCs is based on whether ASCs asked respondents to indicate their hours worked per week (not all ASCs asked this question). However, the precise number of ASCs and respondents corresponding to each data cell in the tables will vary because of individual nonresponse/missing data.

Table B-6. Composite Measure Average Percent Positive Response by Hours Worked Per Week - 2020 SOPS ASC Database

		Hours Worked Per Week				
	Patient Safety Culture Composite Measures	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More Than 40 Hours	
	# ASCs	260	265	277	250	
	# Respondents	3,209	1,468	4,424	1,021	
1.	Organizational Learning – Continuous Improvement	95%	90%	90%	93%	
2.	Communication About Patient Information	94%	89%	86%	90%	
3.	Management Support for Patient Safety	94%	88%	86%	92%	
4.	Communication Openness	94%	87%	83%	90%	
5.	Teamwork	95%	87%	82%	87%	
6.	Response to Mistakes	92%	82%	78%	87%	
7.	Staff Training	88%	79%	75%	83%	
8.	Staffing, Work Pressure, and Pace	87%	70%	65%	74%	
	Composite Measure Average	92%	84%	81%	87%	

Table B-7. Item Average Percent Positive Response by Hours Worked Per Week – 2020 SOPS ASC Database (Page 1 of 3)

		Hours Worked Per Week					
	Survey Items by Composite Measure	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More than 40 Hours		
	# ASCs	260	265	277	250		
	# Respondents	3,209	1,468	4,424	1,021		
1.	Organizational Learning – Continuous Improvement						
1.	This facility actively looks for ways to improve patient safety. (C1)	96%	91%	91%	93%		
2.	We make improvements when someone points out patient safety problems. (C3)	96%	91%	91%	95%		
3.	We are good at changing processes to make sure the same patient safety problems don't happen again. (C6)	94%	87%	89%	92%		
2.	Communication About Patient Information						
1.	Important patient care information is clearly communicated across areas in this facility. (A1)	98%	95%	93%	97%		
2.	Key information about patients is missing when it is needed. (A5R)	83%	74%	70%	74%		
3.	We share key information about patients as soon as it becomes available. (A7)	98%	93%	91%	96%		
4.	Within this facility, we do a good job communicating information that affects patient care. (A9)	97%	93%	91%	94%		
3.	Management Support for Patient Safety						
1.	Managers encourage everyone to suggest ways to improve patient safety. (E1)	94%	88%	86%	92%		
2.	Management examines near-miss events that could have harmed patients but did not. (E2)	93%	88%	87%	92%		
3.	Management provides adequate resources to improve patient safety. (E3)	94%	87%	86%	92%		

Table B-7. Item Average Percent Positive Response by Hours Worked Per Week – 2020 SOPS ASC Database (Page 2 of 3)

		Hours Worked Per Week				
	Survey Items by Composite Measure	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More than 40 Hours	
	# ASCs	260	265	277	250	
	# Respondents	3,209	1,468	4,424	1,021	
4.	Communication Openness					
1.	We feel comfortable asking questions when something doesn't seem right. (A2)	97%	94%	91%	96%	
2.	When we see someone with more authority doing something unsafe for patients, we speak up. (A4)	95%	90%	87%	90%	
3.	Our ideas and suggestions are valued in this facility. (A6)	90%	76%	71%	84%	
5.	Teamwork					
1.	When someone in this facility gets really busy, others help out. (B1)	96%	91%	85%	90%	
2.	Doctors and staff clearly understand each other's roles and responsibilities. (B4)	96%	89%	84%	88%	
3.	Our facility allows disrespectful behavior by those working here. (B6R)	90%	75%	70%	78%	
4.	We work together as an effective team. (B8)	97%	91%	87%	92%	
6.	Response to Mistakes					
1.	Staff are treated fairly when they make mistakes. (C2)	93%	83%	75%	87%	
2.	Learning, rather than blame, is emphasized when mistakes are made. (C4)	92%	80%	74%	85%	
3.	Staff are told about patient safety problems that happen in this facility. (C5)	92%	84%	84%	90%	



Table B-7. Item Average Percent Positive Response by Hours Worked Per Week – 2020 SOPS ASC Database (Page 3 of 3)

			Hours Worked Per Week				
	Survey Items by Composite Measure	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More than 40 Hours		
	# ASCs	260	265	277	250		
	# Respondents	3,209	1,468	4,424	1,021		
7.	Staff Training						
1.	Staff who are new to this facility receive adequate orientation. (B2)	90%	80%	76%	87%		
2.	Staff feel pressured to do tasks they haven't been trained to do. (B3R)	84%	73%	66%	77%		
3.	We get the on-the-job training we need in this facility. (B5)	91%	84%	81%	86%		
4.	Staff get the refresher training they need. (B7)	88%	80%	76%	82%		
8.	Staffing, Work Pressure, and Pace						
1.	We have enough staff to handle the workload. (A3)	93%	83%	76%	82%		
2.	There is enough time between procedures to properly prepare for the next one. (A8)	94%	83%	77%	88%		
3.	We feel rushed when taking care of patients. (A10R)	74%	45%	41%	51%		

Table B-8. Item Average Percentages for Near-Miss Documentation by Hours Worked Per Week – 2020 SOPS ASC Database

	Hours Worked Per Week					
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (D1)	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More than 40 Hours		
# ASCs	260	265	277	250		
# Respondents	3,209	1,468	4,424	1,021		
Always or Most of the time	92%	87%	87%	91%		
Always	66%	60%	62%	65%		
Most of the time	26%	27%	25%	26%		
Sometimes	6%	9%	8%	7%		
Rarely	2%	3%	3%	3%		
Never	0%	1%	1%	0%		

Note: Percentages may not add to 100 due to rounding. In addition, "Always" and "Most of the time" may not add to the subtotal shown due to rounding.

Table B-9. Average Percentage of Respondents Giving Their Ambulatory Surgery Center an Overall Rating on Patient Safety by Hours Worked Per Week – 2020 SOPS ASC Database

	Hours Worked Per Week					
Overall Rating on Patient Safety (F1)	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More than 40 Hours		
# ASCs	260	265	277	250		
# Respondents	3,209	1,468	4,424	1,021		
Excellent or Very good	93%	85%	82%	87%		
Excellent	67%	49%	45%	55%		
Very good	26%	35%	37%	32%		
Good	5%	12%	13%	10%		
Fair	1%	3%	4%	2%		
Poor	0%	1%	1%	0%		

Note: Percentages may not add to 100 due to rounding. In addition, "Excellent" and "Very good" may not add to the subtotal shown due to rounding.

Table B-10. Item Average Percentages for Communication in the Surgery/Procedure Room by Hours Worked Per Week – 2020 SOPS ASC Database

		Hours Worked Per Week					
Cor	mmunication in the Surgery/Procedure Room	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More than 40 Hours		
	# ASCs	260	265	277	250		
	# Respondents	3,209	1,468	4,424	1,021		
In the past 6 months, how often were the following actions done in your facility?							
1.	Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (G1)	97%	92%	89%	94%		
2.	Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns. (G2)	80%	67%	62%	66%		
3.	Immediately after procedures, team members discussed any concerns for patient recovery. (G3)	84%	73%	69%	76%		

**Note:** (1) The item's survey location is shown after the item text. (2) The percent positive response shown is based on those who responded "Most of the time" or "Always." (3) Results only include those respondents who answered "Yes" to typically being in the surgery/procedure room during surgeries, procedures, or treatments.