SOPS® Diagnostic Safety Supplemental Item Set for the SOPS Medical Office Survey

Language: English

Purpose: This supplemental item set was designed for use with the core SOPS® Medical Office Survey to help medical offices assess the extent to which their organizations support the diagnostic process, accurate diagnoses, and communication around diagnoses.

Placement: This supplemental item set should be added to the end of the SOPS Medical Office Survey, after Section G: Overall Ratings, just before the Background Questions section. Be sure to include the introductory text and subheadings. Add the SOPS Medical Office Background Questions **after** these diagnostic safety items.

Composite Measures: A composite measure is a grouping of two or more survey items that assess the same area of culture. The composite measures in this supplemental item set are listed below along with the internal consistency reliability scores (Cronbach's alpha).[1]
- Time Availability (3 items) *(Cronbach's alpha = 0.77)*
- Testing and Referrals (4 items) *(Cronbach's alpha = 0.81)*
- Provider and Staff Communication Around Diagnosis (5 items) *(Cronbach's alpha = 0.76)*

Administration Instructions: To submit data from this supplemental item set to the AHRQ SOPS Medical Office Survey Database, and to enable comparisons to the Database, administer the supplemental item set in its entirety without modifications or deletions:
- No changes to any of the survey item text and response options
- No reordering of survey items

Calculating Results: For more information on preparing and analyzing data and calculating results, please refer to Chapter 5 in the Medical Office Survey User's Guide. Additionally, the Data Entry and Analysis Tool for the Diagnostic Safety Supplemental Item Set can be used to calculate results. To request this tool, email DatabasesOnSafetyCulture@westat.com.

For assistance with this supplemental item set, please contact the SOPS Help Line at 1-888-324-9749 or SafetyCultureSurveys@westat.com.

Last updated: December 2022

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[1] Zebrak, K., Famolaro, T., Yount, N., and Sorra, J. (2021). Development, pilot testing, and psychometric analysis of the AHRQ Surveys on Patient Safety Culture™ (SOPS®) Diagnostic Safety Supplemental Items for Medical Offices

Your Medical Office's Processes Around Diagnosis

The following items ask about **your medical office's processes around diagnosis**. The processes start when a patient seeks care for a health problem, and include:

- Gathering, integrating, and interpreting information about the patient (e.g., clinical history, physical exam, test and imaging results, referrals),
- Making an initial diagnosis,
- Discussing the diagnosis with the patient, and
- Following up with the patient and revising the diagnosis over time, as needed.

SECTION A: Time Availability

How much do you agree or disagree with the following statements?	Strongly Disagree ▼	Disagree ▼	Neither Agree nor Disagree ▼	Agree ▼	Strongly Agree ▼	Does Not Apply or Don't Know ▼
1. The amount of time for appointments is long enough to fully evaluate the patient's presenting problem(s)	☐1	☐2	☐3	☐4	☐5	☐9
2. Providers in this office have enough time to review the relevant information related to the patient's presenting problem(s)	☐1	☐2	☐3	☐4	☐5	☐9
3. Providers in this office finish their patient notes by the end of their regular workday	☐1	☐2	☐3	☐4	☐5	☐9

SECTION B: Testing and Referrals

How much do you agree or disagree with the following statements?	Strongly Disagree ▼	Disagree ▼	Neither Agree nor Disagree ▼	Agree ▼	Strongly Agree ▼	Does Not Apply or Don't Know ▼
1. This office is effective at tracking a patient's test results from labs, imaging, and other diagnostic procedures	☐1	☐2	☐3	☐4	☐5	☐9
2. When this office doesn't receive a patient's test results, staff follow up	☐1	☐2	☐3	☐4	☐5	☐9
3. All test results are communicated to patients, even if the test results are normal	☐1	☐2	☐3	☐4	☐5	☐9
4. When this office makes a high priority referral, we try to confirm whether the patient went to the appointment	☐1	☐2	☐3	☐4	☐5	☐9

SECTION C: Provider and Staff Communication Around Diagnosis

How much do you agree or disagree with the following statements?	**Strongly Disagree** ▼	**Disagree** ▼	**Neither Agree nor Disagree** ▼	**Agree** ▼	**Strongly Agree** ▼	**Does Not Apply or Don't Know** ▼
1. Providers in this office encourage staff to share their concerns about a patient's health condition.	$\square_1$	$\square_2$	$\square_3$	$\square_4$	$\square_5$	$\square_9$
2. Providers document differential diagnoses when they have **not** ruled out other diagnoses	$\square_1$	$\square_2$	$\square_3$	$\square_4$	$\square_5$	$\square_9$
3. When a provider thinks another provider in this office/system may have missed a diagnosis, they inform that provider	$\square_1$	$\square_2$	$\square_3$	$\square_4$	$\square_5$	$\square_9$
4. When a missed, wrong, or delayed diagnosis happens in this office, we are informed about it ...	$\square_1$	$\square_2$	$\square_3$	$\square_4$	$\square_5$	$\square_9$
5. Providers in this office talk directly with specialists/radiologists/pathologists when something needs clarification	$\square_1$	$\square_2$	$\square_3$	$\square_4$	$\square_5$	$\square_9$