

SOPS® Workplace Safety Supplemental Item Set for the SOPS Nursing Home Survey

Language: English

Purpose: This supplemental item set was designed for use with the core <u>SOPS® Nursing Home Survey</u> to help nursing homes assess the extent to which their organization's culture supports workplace safety for staff.

Placement: This supplemental item set should be added to the end of the SOPS Nursing Home Survey, after Section E: Overall Ratings, just before the Background Questions section. Be sure to include the introductory text and subheadings. Add the SOPS Nursing Home Survey Background Questions **after** the Workplace Safety Background Questions (Job Satisfaction and Intent To Leave).

Composite Measures: A composite measure is a grouping of two or more survey items that assess the same area of workplace safety culture. The composite measures in this supplemental item set are listed below along with the internal consistency reliability scores (Cronbach's alpha).¹

- Protection From Workplace Hazards (4 items) (Cronbach's alpha = 0.84)
- Moving, Transferring, or Lifting Residents (3 items) (Cronbach's alpha = 0.84)
- Addressing Inappropriate Resident Behavior Toward Staff (3 items) (Cronbach's alpha = 0.90)
- Interactions Among Staff (2 items) (Cronbach's alpha = 0.82)
- Supervisor Support for Workplace Safety (3 items) (Cronbach's alpha = 0.93)
- Management Support for Workplace Safety (3 items) (Cronbach's alpha = 0.94)

Additional Measures: Other measures assess:

- Workplace Safety Reporting (1 item).
- Work Stress/Burnout² (1 item).
- Overall Rating on Workplace Safety for Staff (1 item)
- · Background Questions (2 items):
 - Job Satisfaction
 - Intent To Leave

Administration Instructions: To submit data from this supplemental item set to the AHRQ <u>SOPS Nursing Home Survey Database</u>, and to enable comparisons with 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: When calculating percent positive scores for Work Stress/Burnout, note the following:

- Positive response on Work Stress/Burnout, in other words "Experiencing no symptoms of burnout," is calculated by combining the percentages of response to the first two responses:
 - 1: "I have no symptoms of burnout" and
 - 2: "I am under stress, and don't always have as much energy as I did, but I don't feel burned out."

For an example of how to represent results for Work Stress/Burnout, refer to the <u>Pilot Study Results From the AHRQ SOPS Workplace Safety Supplemental Item Set for Nursing Homes</u>.

• For more information on analyzing data and calculating results, refer to Chapter 6 in the Nursing Home Survey User's Guide. In addition, the Data Entry and Analysis Tool for the Workplace Safety Supplemental Item Set for nursing homes can be used to calculate results. To request this tool, email DatabasesOnSafetyCulture@westat.com.

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

Last updated: January 2023

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¹ Zebrak K, Yount N, Sorra J, Famolaro T, Gray L, Townsend R. Development, Pilot Study, and Psychometric Analysis of the AHRQ Surveys on Patient Safety Culture™ (SOPS®) Workplace Safety Supplemental Item Set for Nursing Homes. Rockville, MD: AHRQ; 2023.

The Work Stress/Burnout item was adapted from Dr. Mark Linzer's Mini-Z 2.0 survey tool (https://www.professionalworklife.com/mini-z-survey).

Workplace Safety

The following questions ask about workplace safety for staff in your nursing home.

If a question does not apply to you or you don't know the answer, please select "Does Not Apply or Don't Know."

Section A: Protection From Workplace Hazards How much do you agree or disagree with the following statements about your nursing home? **Does Not** Neither Apply or Strongly Agree nor Strongly Don't Disagree Disagree Disagree Agree Agree Know 1. There are good procedures to protect staff from contagious diseases, body fluids, or hazardous materials 2. Staff are provided with the appropriate personal \prod_{5} protective equipment (PPE) 3. Staff use PPE appropriately 4. Staff clean their hands before and after helping residents with personal care..... Section B: Moving, Transferring, or Lifting Residents How often do the following things happen in your nursing home? **Does Not** Apply or Most of Don't Never Rarely Sometimes the time **Always** Know 1. Equipment or assistive devices are available when needed to help move, transfer, or lift □ 9 \prod_1 \prod_{2} \square 3 \square_4 residents..... 2. Equipment and assistive devices are in good working condition when needed to help move, \prod_{9} \prod_{3} \square_1 4 transfer, or lift residents..... 3. Staff use equipment or assistive devices when needed to help move, transfer, or lift \prod_{1} \square_2 residents.....

Section C: Addressing Inappropriate Resident Behavior Toward Staff

Inappropriate resident behavior toward staff includes:

- Inappropriate physical contact toward staff, such as residents biting, spitting, scratching, hitting, kicking, or groping, or other unwanted physical contact with staff.
- Inappropriate verbal communication toward staff, such as residents yelling, using offensive language, bullying, or threatening, or other harassment of staff.

How	v much do you agree or disagree with the follo	wing state	ements ab	out your nu	rsing hon	ne?	Daga Na
		Strongly Disagree	Disagree ▼	Neither Agree nor Disagree ▼	Agree ▼	Strongly Agree ▼	Does No Apply or Don't Know
1.	Staff are trained to identify triggers or situations that could lead to inappropriate resident behavior toward staff	□ 1	□ 2	☐ 3	□ 4	□ 5	9
2.	Staff are trained on how to de-escalate or calm down situations when residents are agitated or upset	□ 1	□ 2	3	☐ 4	□ 5	□ 9
3.	There are good procedures to keep staff safe from inappropriate resident behavior	□ 1	□ 2	□ 3	□ 4	□ 5	9
	Section D: In	teraction	s Amon	g Staff			
How	v often do the following things happen in your	nursing h	ome?				Does No
		Never ▼	Rarely ▼	Sometimes ▼	Most of the time ▼	Always ▼	Apply or Don't Know
1.	Staff are rude to other staff in this nursing home	□ 1	□ 2	□ 3	☐ 4	□ 5	9
2.	Staff bully other staff in this nursing home	□ 1	□ 2	☐ 3	☐ 4	☐ 5	9

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Цам	Section E: Supervisor Support for Workplace Safety How much do you agree or disagree with the following statements about your supervisor?								
пом	v much do you agree or disagree with the folio	Strongly Disagree	Disagree ▼	Neither Agree nor Disagree	Agree ▼	Strongly Agree	Does Not Apply or Don't Know		
1.	My supervisor encourages staff to report their concerns about workplace safety	□ 1	□ 2	□ 3	☐ 4	 5	 9		
2.	My supervisor listens to staff ideas and suggestions about workplace safety	□ 1	□ 2	□ 3	☐ 4	□ 5	 9		
3.	My supervisor can be trusted to do the right thing to keep staff safe	□ 1	☐ 2	☐ 3	☐ 4	☐ 5	 9		
							i		
	Section F: Manageme	nt Suppo	ort for Wo	orkplace \$	Safety				
How hom	v much do you agree or disagree with the foll	owing stat	ements ab	oout manag	ement in	your nursi	ng		
11011		Strongly Disagree ▼	Disagree ▼	Neither Agree nor Disagree ▼	Agree ▼	Strongly Agree ▼	Does Not Apply or Don't Know		
1.	The actions of management show that the safety of staff is a top priority	□ 1	□ 2	□ 3	□ 4	☐ 5	 9		
2.	Management provides adequate resources to ensure the safety of staff	□ 1	□ 2	□ 3	□ 4	 5	 9		
3.	Management takes action when staff report concerns about workplace safety	□ 1	□ 2	□ 3	☐ 4	□ 5	 9		
	Section G: Workplace Safety Reporting								

How much do you agree or disagree with the following statement about your nursing home?

		Strongly Disagree	Disagree ▼	Neither Agree nor Disagree ▼	Agree ▼	Strongly Agree ▼	Does Not Apply or Don't Know
1.	Staff can report their concerns about workplace safety without fear of negative consequences	□ 1	☐ 2	□ 3	☐ 4	☐ 5	 9

Section H: Work Stress/Burnout

1.	Using your own definition of "burnout," please select <i>one</i> of the answers below:							
	☐ 1 I have no symptoms of burnout.							
	\square 2 I am under stress, and don't always have as much energy as I did, but I don't feel burned out.							
	☐ 3 I am begin	ning to burn out	and have one	or more sympton	ns of burnout, e.g.,	emotional exhaustion.		
	☐ 4 The sympt	toms of burnout	that I am exper	iencing won't go	away. I think abou	t work frustrations a lot.*		
	☐ 5 I feel comp	oletely burned o	ut. I am at the p	oint where I may	need to seek help	.*		
	* If you indicated you have symptoms of burnout or feel completely burned out, please consider seeking assistance [e.g., from your insurance provider or employee assistance plan (EAP)].							
		Section	I: Overall Ra	ting on Work	place Safety fo	or Staff		
1.	How would you rate your nursing home on workplace safety for staff?							
	Poor ▼	Fair ▼	Good ▼	Very good ▼	Excellent ▼			
	□ 1	□ 2	□ 3	☐ 4	☐ 5			
			Bad	ckground Que	estions			
1.	Overall, how satisfied are you with your job?							
	☐ 1 Very Dissatisfied							
	☐ 2 Dissatisfied							
	☐ 3 Neither Satisfied nor Dissatisfied							
	☐ 4 Satisfied							
	☐ 5 Very Satisfied							
2.	Are you consid	dering leaving	your nursing h	ome within the	next year, and if	so, why?		
	☐ 1 No							
	☐ 2 Yes, to reti	ire						
	☐ 3 Yes, to tak	e another job in	another nursing	g home				
	☐ 4 Yes, to tak	e another job wi	thin healthcare					
	☐ 5 Yes, to take another job outside of healthcare							
	☐ 6 Yes, other							