

# ATTACHMENT B-2: AHRQ Hospital Survey on Patient Safety Culture Comparative Database, Supporting Statement B-- Screen shots of Hospital SOPS Data Submission Web Site Information Collection Forms

**Figure 1:** Login page of the secure data submission web site. Users register by clicking “Register for an account.”

The screenshot shows the login page for the AHRQ Hospital Survey on Patient Safety Culture Comparative Database. The header features the AHRQ logo and the text "HOSPITAL SURVEY ON PATIENT SAFETY CULTURE COMPARATIVE DATABASE". The main content area is titled "Welcome" and includes a brief introduction to the system. Below this, there are sections for "Registration" and "What You Will Need for Submission". The "Registration" section includes a link to "Register for an account" and a note that users will receive an email with login information. The "What You Will Need for Submission" section lists several requirements, including signing a Data Use Agreement, uploading questionnaires, and providing site information. A "More Information" box on the right contains links for "Login", "Register for an account", and "Web Training Session". The footer includes the AHRQ logo, the tagline "Advancing Excellence in Health Care", and a list of links for "AHRQ Home", "Questions?", "Contact AHRQ", "Site Map", "Accessibility", "Privacy Policy", "Freedom of Information Act", "Disclaimers", and "Plain Writing Act".

**Welcome**

Welcome to the AHRQ Hospital Survey on Patient Safety Culture Data Submission System. In response to interest from hospitals using the AHRQ Hospital Survey on Patient Safety Culture (Hospital SOPS), AHRQ has established the Hospital SOPS Comparative Database as a central repository for this survey data. The result of this database, a Hospital SOPS Comparative Database Report, will provide average scores and percentiles on the survey items and composites to help hospitals assess their own results to identify strengths and opportunities for improvement.

**Registration**

[Register for an account](#): After completing the form users will receive an email including login information to activate the account.

**What You Will Need for Submission**

See [Full Checklist](#) (PDF, 87 KB, [PDF HELP](#))

- **Data Use Agreement:** Each hospital is required to sign a Data Use Agreement (DUA) and fax it to 1-888-852-8277.
  - [Hospital SOPS Data Use Agreement](#) (PDF, 135 KB, [PDF HELP](#))
- **Hospital SOPS Questionnaire(s) Administered:** Users will need to upload a copy of the actual questionnaire(s) administered. If you used a copy of the Spanish questionnaire, please upload this questionnaire as well. We will review the submitted questionnaire(s) and users will receive an approved/not approved email within 3 business days.

**NOTE:** Your questionnaire will not be approved if

  - You made changes to any of the questionnaire item text and/or response options.
  - You reordered questionnaire items A1–G1.
  - You added new questions between items A1 and G1 and did not add new questions at the end of the questionnaire after Section G, before the demographic questions in Section H.
- **Hospital Site Information:** Users can upload hospital site information in one of two ways, one at a time on the Data Submission Web site or all at once in an Excel spreadsheet.
  - [Hospital SOPS Site-Level Specifications](#) (PDF, 178 KB, [PDF HELP](#))
  - [Sample Hospital Site Information Data File](#) (XLSX, 10 KB)
- **Hospital SOPS Data:** Users will need to upload their Hospital survey data, conforming to the *Hospital SOPS Data Specifications*.
  - [Hospital SOPS Survey Data Specifications](#) (PDF, 258 KB, [PDF HELP](#))
  - [Sample Hospital Survey Data File](#) (XLSX, 13 KB)

**Questions or Need Help?**

For technical assistance please contact the SOPS Database:

- Email: [DatabasesOnSafetyCulture@westat.com](mailto:DatabasesOnSafetyCulture@westat.com)
- Phone: [1-888-324-9790](tel:1-888-324-9790)

**More Information**

- [Login](#)
- [Register for an account](#)
- [Web Training Session](#)

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U.S. Department of Health & Human Services | The White House | USA.gov: The U.S. Government's Official Web Portal

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**Figure 2:** Main page/menu of secure data submission web site

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**HOSPITAL SURVEY ON PATIENT SAFETY CULTURE  
COMPARATIVE DATABASE**

Main Menu | 1: Site Information | 2: Submit Questionnaire | 3: Download Data Use Agreement | 4: Submit Data File | 5: Submission Status | Logout

Account: Dummy / Test User - Westat [Return to Admin](#) [Contact Us](#)

### Main Menu

- [Step 1 - Enter hospital information](#)

Enter all the required characteristics for each participating hospital prior to submitting a data file.
- [Step 2 - Submit HSOPS questionnaire](#)

Upload and link a HSOPS questionnaire for each hospital. An e-mail will be sent once the questionnaire is reviewed by Westat.

**NOTE:** Your questionnaire will not be approved if.

  - You made major changes to any of the questionnaire item text.
  - You re-order items A1-F11.
  - You added new questions which are NOT at the end of the questionnaire.
  - You are missing questions from a patient safety composite.
- [Step 3 - Download Data Use Agreement](#)

Each hospital or hospital system must submit a signed Data Use Agreement. Vendors and QIOs can not sign data use agreements for hospitals or hospital systems.

  - [Hospital Data Use Agreement](#)

Hospital systems representing multiple hospitals are required to list all hospitals the signed Data Use Agreement covers.
- [Step 4 - Submit Data file for review and approval](#)

Upload data files for each hospital that administered the HSOPS survey. The data file must be in Excel format. Please follow data specifications accordingly.

Specifications

  - **NEW:** [Excel Specification](#)

Sample Excel File

  - [Example Excel Data File](#)
- [Step 5 - Submission status](#)

View the current submission status of each hospital in your account. Westat will review the Data Use Agreement, Hospital Information, Questionnaire and Data File reports and assign a final approval or rejection status. You will be notified by email of the final status of the submission.

If your hospital(s) is a trending hospital, please click on step 5 and complete the patient safety initiative form for each trending hospital that you are submitting data for.

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**Figure 3:** Submit questionnaire and link questionnaire to hospital(s).

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Account: **Westat - Dummy Hospital** [Return to Admin](#) [Contact Us](#)

**To Upload Questionnaire:**

1. Click 'Browse' to locate the questionnaire file for upload.
2. Click 'Upload Questionnaire' to submit Questionnaire.
3. If you are submitting data for more than one site and different questionnaires were used, then you may upload each version and link them to the appropriate site(s).

**View and Link Questionnaires:**

1. View the list of uploaded questionnaires and make sure that the questionnaires are linked to the appropriate hospital(s).
2. You can link one questionnaire to more than one hospital by clicking "View and Link Questionnaire".

**VIEW AND LINK QUESTIONNAIRE**

**Upload Questionnaire:**

File Path:

Note: Acceptable file formats are .doc, .wpd, .pdf, or .rtf.

**Figure 4:** Upload data for each participating hospital

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Account: **Westat - Dummy Hospital** [Return to Admin](#) [Contact Us](#)

**Instructions:**

- To begin submitting data file, click next to the hospital you are submitting data for.
- View [data specifications](#), [data use agreement](#), and [sample data file](#).

Page 1 of 1 (Total number of records: 1)

Site Name	Medicare Provider ID	Month of Data Collection Completion	Year of Data Collection Completion	Data File Name	Total Records	Status
Site Name: Dummy Hospital (111111)						