

Attachment H: Example Screen Shots of Pharmacy Survey on Patient Safety Culture Data Submission Web Site Information Collection

Users upload the survey questionnaire they administered to enable us to determine whether any changes were made to the survey. They then link the survey to their pharmacies and upload individual-level survey data for each pharmacy. In uploading their files, users select Community Pharmacy or Hospital Pharmacy. The screen shots below demonstrate the survey and data submission process.

Figure 1: Submit Questionnaire and Link Questionnaire to Pharmacies

The screenshot shows the AHRQ Agency for Healthcare Research and Quality website. The header includes the U.S. Department of Health & Human Services logo and the AHRQ logo with the tagline 'Advancing Excellence in Health Care'. The main navigation bar features 'SURVEYS ON PATIENT SAFETY CULTURE COMPARATIVE DATABASES' and a search box. The sidebar on the left is titled 'Databases' and contains a list of options: 'Welcome, Shakia', 'Submitting Data' (with sub-items: '1. Enter Site Information', '2. Submit Data Use Agreement', '3. Submit Questionnaire', '4. Submit Respondent Level Data File(s)'), 'Check Your Submission Status', 'Your Account' (with sub-items: 'Change Password', 'Edit Contact Information'), and 'Logout'. A 'Stay Connected' button is also present. The main content area is titled 'Questionnaires' and includes instructions: 'To upload a questionnaire, click on "Upload a questionnaire".' and 'If you already have an approved questionnaire and you have added or replaced pharmacies using the same questionnaire, link your pharmacies to the questionnaire by clicking on the file name of the accepted questionnaire below.' Below the instructions is a link to 'Upload a questionnaire'. A table with the following columns is shown: 'Status', 'Date Received', 'File Name', 'Language', and 'Number of Sites using this Questionnaire'. The table currently displays 'Records: 0'. A search bar at the bottom of the table area contains the text 'Status' and a 'Find' button. The footer of the page includes the text 'DatabasesOnSafetyCulture @westat.com' and the phone number '888-324-9790'.

Figure 2a: Submit Questionnaire and Link Questionnaire to Pharmacies, continued

--Select-- Community Pharmacy

Databases

You are here: [Databases](#) > [Submitting Data](#) > Upload Questionnaire

[Logout](#)

A field with an asterisk (*) before it is a required field.

Submit Questionnaire: Select file

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

*** Language**

English

Spanish

Other

*** Select the sites that used this questionnaire** [Check All](#) [Uncheck All](#)

Select	Site Name	NPI	Store	Address 1	Address 2	City	State	Zip Code
<input type="checkbox"/>	Test123			123 west dr		rockville	MD	20850

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Surveys on Patient Safety Culture
OMB Control Number: 0935-0218, Expiration Date: 6/30/2017

Figure 2b: Submit Questionnaire and Link Questionnaire to Pharmacies, continued

--Select--Hospital Pharmacy

Databases

You are here: [Databases](#) > [Submitting Data](#) > Upload Questionnaire

[Logout](#)

A field with an asterisk (*) before it is a required field.

Submit Questionnaire: Select file

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

*** Language**

English

Spanish

Other

*** Select the sites that used this questionnaire** [Check All](#) [Uncheck All](#)

Select	Site Name	Medicare Provider ID	AHA ID	Address 1	Address 2	City	State	Zip Code
<input type="checkbox"/>	Hospital Pharmacy Name	123456	1234567	Address123		Rockville	MD	20850

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 Agency for Healthcare Research and Quality • 540 Gaither Road Rockville, MD 20850 • Telephone: (301) 427-1364

Figure 3a: Upload Data for Each Participating Pharmacy

--Select--Community Pharmacy

Databases

You are here: [Databases](#) > [Submitting Data](#) > Submit Respondent Level Data File(s)

[Logout](#)

Welcome, Shakia

- **Submitting Data**
 - 1. Enter Site Information
 - 2. Submit Data Use Agreement
 - 3. Submit Questionnaire
- 4. **Submit Respondent Level Data File(s)**
- **Check Your Submission Status**
- **Your Account**
 - Change Password
 - Edit Contact Information
- **Logout**

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Submit Respondent Level Data File(s)

Instructions:

- Once your questionnaire is approved you can begin submitting your data file(s). Select "**Submit Data File**" next to the pharmacy you are submitting data for to upload your file(s).
- View data specifications ([PDF](#), 153 KB, [PDF HELP](#))
- View sample data file ([XLSX](#), 13 KB)

<< Previous | Next >> **Records: 1**

	Submit	Status	Site Name	NPI #	Store #	Address	City	State	Denominator	End Month/Year	Current Data File	Currei
1.	Submit data file	Pending	Test123			123 west dr	rockville	MD	15	9/2014		

<< Previous | Next >>

Search:

<

>

Figure 3b: Upload Data for Each Participating Pharmacy

-- Select-- Hospital Pharmacy

Databases

You are here: [Databases](#) > [Submitting Data](#) > Submit Respondent Level Data File(s)

Submit Respondent Level Data File(s)

Instructions:

- Please only submit data from your most recent survey administration.**
- Once your questionnaire is approved you can begin submitting your data file(s). Select "Submit Data File" next to the hospital you are submitting data for to upload your file(s).
- View data specifications ([PDF](#), 258 KB, [PDF HELP](#))
- View sample data file ([XLSX](#), 13 KB)

Stay Connected

<< Previous | Next >> **Records: 1**

	Submit	Status	Medicare Provider ID	AHA ID	Site Name	Address	City	State	Denominator	End Month/Year
1.	Submit data file	Pending	123456	1234567	Hospital	Address	123 Rockville	MD	100	2/2015

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Figure 4: Upload Data for Each Participating Pharmacy, continued

The screenshot shows the AHRQ Agency for Healthcare Research and Quality website. The header includes the U.S. Department of Health & Human Services logo and the AHRQ logo with the tagline "Advancing Excellence in Health Care". The main navigation bar contains "SURVEYS ON PATIENT SAFETY CULTURE COMPARATIVE DATABASES" and a search box. The left sidebar is titled "Databases" and lists navigation options: "Welcome, Shakia", "Submitting Data" (with sub-items: "1. Enter Site Information", "2. Submit Data Use Agreement", "3. Submit Questionnaire", "4. Submit Respondent Level Data File(s)"), "Check Your Submission Status", "Your Account" (with sub-items: "Change Password", "Edit Contact Information"), and "Logout". The main content area is titled "Submit Data: Select file (Step 1 of 2)". It contains instructions: "Verify that the data you are submitting matches the following site information:" followed by a bulleted list: "Pharmacy Name, and Pharmacy Address." Below this, it says "Select 'Browse' to locate the data file. Select 'Next'." A text box displays the site information: "Test123", "123 west dr", "rockville MD, 20850". A note states: "Note: Only Excel files are acceptable (valid file extensions are .xls and .xlsx)." There is a "Browse..." button and a "Next >" button at the bottom of the form.

U.S. Department of Health & Human Services www.hhs.gov

AHRQ Agency for Healthcare Research and Quality
Advancing Excellence in Health Care www.ahrq.gov

**SURVEYS ON PATIENT SAFETY CULTURE
COMPARATIVE DATABASES**

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Search

Databases

Welcome, Shakia

- Submitting Data
 1. Enter Site Information
 2. Submit Data Use Agreement
 3. Submit Questionnaire
 4. Submit Respondent Level Data File(s)
- Check Your Submission Status
- Your Account
 - Change Password
 - Edit Contact Information
- Logout

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888-324-9790

You are here: [Databases](#) > [Submitting Data](#) > File Upload/Quality Report [Logout](#)

Instructions:
Verify that the data you are submitting matches the following site information:

- Pharmacy Name, and
- Pharmacy Address.

Select 'Browse' to locate the data file.
Select 'Next'.

Submit Data: Select file (Step 1 of 2)

Data file must match Site Name, Address, City, State, and Zip code.

**Test123
123 west dr
rockville MD, 20850**

Note: Only Excel files are acceptable (valid file extensions are .xls and .xlsx).