**SUPPORTING STATEMENT**

**Part B**

**Collection of Information for**

**Agency for Healthcare Research and Quality’s (AHRQ)**

**Ambulatory Surgery Center Survey on Patient Safety**

**Database**

**March 1, 2021**

Agency of Healthcare Research and Quality (AHRQ)

## B. Collection of Information Employing Statistical Methods

## 1. Description of Respondent Universe

The AHRQ Surveys on Patient Safety Culture™ (SOPS®) Ambulatory Surgery Center (ASC) Database serves as a central U.S. repository for data on the survey. However, the database is comprised of data that are voluntarily submitted by ASCs that have administered the survey, and is not be a statistically representative sample of all U.S. ASCs. Estimates based on this self-selected group may produce biased estimates of the population and it is not possible to compute estimates of precision from such a self-selected group.

AHRQ developed and pilot tested the Ambulatory Surgery Center Survey on Patient Safety Culture (ASC SOPS) with OMB approval (OMB No. 0935-0216; approved on October 31, 2013). The original ASC SOPS Database was approved on September 10, 2018 (OMB NO. 0935-0242).

The ASC Survey on Patient Safety Culture Database report was published in 2020. Results from 282 ASCs that participated in the 2020 Database are available on the AHRQ website[[1]](#endnote-1).

The Centers for Medicare and Medicaid Services (CMS) defines ASCs as distinct entities that operate exclusively to provide surgical services to patients who do not require hospitalization and are not expected to need to stay in a surgical facility longer than 24 hours.[[2]](#endnote-2) [[3]](#endnote-3) The number of Medicare-certified ASCs was estimated to be 5,717 in 2018.[[4]](#endnote-4)

Table 1 shows a comparison of national data on ASC specialty type compared to those who voluntarily submitted to the 2020 ASC SOPS Database.

**Table 1. National and AHRQ ASC SOPS Database (2020) ASC Specialty Type**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ASC Specialty Type | U.S. ASCs\* | | ASC SOPS Database (2020) ASCs | |
|  | Number | Percent | Number | Percent |
| Multispecialty | 1,784 | 35% | 216 | 77% |
| Single-specialty (e.g., ophthalmology, dermatology, pain, gastroenterology) | 3,277 | 65% | 66 | 23% |
| *Total* | *5,601* | *100%* | *282* | *100%* |

\* “Single-specialty ASCs” are defined as those with more than 67 percent of their Medicare claims in one clinical specialty. “Multispecialty ASCs” are defined as those with less than 67 percent of their Medicare claims in one clinical specialty. ASCs included in this analysis are limited to those in the 50 states and the District of Columbia with a paid Medicare claim in 2018. Source: MedPAC analysis of Medicare carrier file claims, 2018.[[5]](#endnote-5)

ASCs that submit data to the Database receive a free, customized feedback report that displays their ASC’s results against the aggregated and de-identified results of other ASCs submitting data to the Database. ASCs that do not submit data to the database can still view the ASC SOPS Database report for aggregate results of those ASCs who voluntarily submitted their data to the Database. As part of a toolkit of support materials for the ASC SOPS survey, ASCs can also use a Microsoft® Excel-based Data Entry and Analysis Tool that is an Excel file with macros that will automatically produce graphs and charts of a ASC’s results once data are entered into a data sheet. Many ASCs use this tool to produce their results.

In the overall database report, ASCs are provided with a detailed description and explanation of the statistics that are presented and given examples and guidance on how to calculate their own scores for comparison.

## 2. Information Collection Procedures

Information collection for the AHRQ ASC SOPS Database occurs in a periodic data collection cycle approximately every other year in June. The next submission period is in June 2021. Information collection procedures for submitting and processing data are shown in Figure 1.

**Figure 1. ASC SOPS Comparative Database Data Submission**



**Step 1: Call for Data Submission.** Announcements about the opening of data submission go out through various publicity sources. AHRQ’s patient safety and electronic newsletters target approximately 50,000 subscribers. In addition, the AHRQ Surveys on Patient Safety Culture listserv targets approximately 46,000 subscribers. An example of email announcements calling for data submission is shown in Attachment D, Email # 1 and # 3. Through these efforts, U.S. ASCs will be made aware of and invited to submit their survey data to the database.

As the administrator of the database and under contract with AHRQ, Westat provides free technical assistance to submitting ASCs through a dedicated email address ([DatabasesOnSafetyCulture@westat.com](mailto:DatabasesOnSafetyCulture@westat.com)) and toll-free phone number (1-888-324-9790).

**Step 2: Registration for Potential Participants.** A secure data submission website allows interested parties, such as ASCs, to register and submit data. Registration takes about 3 minutes to complete and asks for contact and other basic information (see Attachment A). After registering, if registrants are deemed eligible to submit data, an automated email is sent to authenticate the account and update the user password (see Attachment D, Email #2).

Once users are registered and have a password, they can enter the main page of the website. Information about eligibility requirements, data use agreements, and data file specifications regarding how to prepare their data for inclusion in the SOPS Database is posted on the main page and can be reviewed.

**Step 3: Enter Facility Information and Upload Questionnaire**. At this step, users provide information about their ASCs, such as point-of-contact, method of survey administration, overall response rate, and other characteristics that we will use to analyze collected data (e.g., specialty type and size) (see Attachment C). They also upload their survey questionnaire that they administered to enable us to determine whether any changes were made to the survey (see Attachment G, Figure 1).

**Step 4: Submit Data Use Agreement (DUA).** To protect the privacy of all participating ASCs, a duly authorized representative from the ASC must sign a data use agreement (DUA) (see Attachment B). The DUA language was reviewed and approved by AHRQ’s general counsel and asserts that the ASC’s data will be handled in a secure manner using necessary administrative, technical, and physical safeguards to limit access to the data and maintain its confidentiality. In addition, the DUA explains that the data are used for the purposes of the database, that only aggregated results will be reported, and that the ASC will not identified by name. Data are not included in the database without this signed DUA. Users can fax, mail, or upload a copy of the signed agreement.

**Step 5: Upload Data File(s).** At this step, users are asked to upload their individual-level survey data for each ASC (see Attachment G, Figure 2). Data submitted through the secure data submission website are encrypted to ensure secure, confidential transmission of the survey data. Data are accepted in Microsoft Excel® format since this is the format preferred by ASCs. Users must upload one data file per ASC. The data file specifications (see Attachment E) are provided to data submitters to ensure that users submit standardized and consistent data in the way variables are named, coded, and formatted.

Once a data file is uploaded, a separate load program developed in Visual Basic (VB) reads the submitted files and loads them into the SQL database that stores the data. A data quality report is then produced and made available to the participant. This report displays item frequencies and flags out-of-range values and incorrectly reverse-coded items. If there are no problems with the data, an acknowledgement of data upload and accepted will be granted during the user session. If data are improperly coded, the user is informed by having a message post on the screen indicating that the data file failed during the user session. Users are expected to fix any errors and resubmit their data file(s) for processing. Once there are no problems, the user is informed of the acceptance of data during the user session with an online message of acceptance.

**Step 6: Approve Data Submission.** Once all of the information required for submission has been submitted and approved, an email is sent to the ASC contact indicating that their data have received final acceptance.

## 3. Methods to Maximize Response Rates

AHRQ makes a number of toolkit materials available to assist ASCs with the SOPS surveys. The ASC SOPS has a Survey User’s Guide that gives users guidance and tips about survey administration on the following topics: planning; selecting a sample; determining their data collection method; data collection procedures (including a section on conducting web surveys); and analyzing data and producing reports[[6]](#endnote-6). The Survey User’s Guide also gives ASCs tips about how to increase response rates through publicity efforts, top management support, use of incentives, and following all steps of proper data collection protocols. Of the ASCs that voluntarily submitted their data for the 2020 ASC SOPS Database, the average response rate was 87% across the 282 ASCs.

The SOPS User Network promotes the database to encourage data submission in a number of ways:

1. AHRQ and AHRQ SOPS email listservs;
2. Organizational partners and stakeholders that have national reach to ASCs;
3. Users that have contacted the SOPS technical assistance helpline about the ASC survey;
4. Other outlets such as webcasts and conferences.

As noted earlier in this document under Information Collection Procedures, Step 1 – Call for Data Submission, announcements about the opening of data submission go out through various publicity sources as a way to boost ASC participation in the database. AHRQ’s electronic newsletter targets approximately 50,000 subscribers. In addition, the AHRQ Surveys on Patient Safety Culture listserv targets approximately 46,000 subscribers. AHRQ, through its contractor Westat, provides free technical assistance to users through a dedicated email box and toll-free phone number. In addition, reminders are sent to database registrants to remind them of the deadline for data submission.

## 4. Tests of Procedures

**Input and Feedback for the Development of the SOPS Database Submission System.** Because the Surveys on Patient Safety Culture are public-use instruments, the SOPS program has generally modeled its data submission processes after those utilized by the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Database that has been in operation since 1998. SOPS staff consulted with CAHPS Database staff and programmers to determine best practices for data submission. This information, as well as feedback obtained during the provision of technical assistance each year the database has been running, has been used to improve the SOPS online data submission system and process over time.

## 5. Statistical Consultants

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1. SOPS ASC Database. Content last reviewed March 2020. Agency for Healthcare Research and Quality, Rockville, MD. <https://www.ahrq.gov/sops/databases/asc/index.html>. Last accessed 1/8/2021. [↑](#endnote-ref-1)
2. See 42 C.F.R. §416.2. See <https://www.gpo.gov/fdsys/granule/CFR-2010-title42-vol3/CFR-2010-title42-vol3-sec416-2>. Last accessed 11/20/2017. [↑](#endnote-ref-2)
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