

AHRQ Nursing Home Survey on Patient Safety Culture Comparative Database, Supporting Statement B

Attachment G: Example Screen Shots of Nursing Home Survey on Patient Safety Culture Data Submission Website Information Collection

Figure 1: Submit Data Use Agreement (DUA) and Link DUA to Nursing Home(s)

The screenshot displays the AHRQ website interface for submitting a Data Use Agreement (DUA). At the top, the AHRQ logo and tagline 'Advancing Excellence in Health Care' are visible, along with the website URL 'www.ahrq.gov'. A search bar and navigation links like 'E-mail Updates', 'Contact Us', 'Site Map', and 'Print Page' are located in the upper right. The main content area is titled 'Submit Data Use Agreement' and includes a breadcrumb trail: 'You are here: Databases > Submitting Data > Upload DUA'. A 'Logout' link is in the top right. The left sidebar contains a 'Databases' menu with options like 'Welcome', 'Submitting Data', 'Check Your Submission Status', and 'Your Account'. The main content area explains that each Nursing Home or System/Chain must sign a DUA and provides instructions on how to submit it, including a link to a PDF and a 'PDF HELP' link. A button labeled 'Upload your DUA' is prominently displayed.

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Advancing Excellence in Health Care www.ahrq.gov

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Databases

Welcome

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

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DatabasesOnSafetyCulture@westat.com
888-324-9790

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

Submit Data Use Agreement

Data Use Agreement

Each Nursing Home or System/Chain wishing to participate in the Nursing Home Survey on Patient Safety Culture Database is required to sign a Data Use Agreement (DUA) each submission period. The DUA assures the confidentiality of the data and explains how the data will be used. The completed and signed DUA can be submitted at any time. The DUA can be uploaded directly to the submission system through the DUA submission portal, emailed to DatabasesOnSafetyCulture@westat.com, or faxed to 1-888-852-8277.

Nursing Home Survey on Patient Safety Culture Data Use Agreement ([PDF](#), 142 KB, [PDF HELP](#))

For technical assistance, please email DatabasesOnSafetyCulture@westat.com or call 1-888-324-9790.

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Figure 1: Submit Data Use Agreement (DUA) and Link DUA to Nursing Home(s), continued

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

Please fill out the information below for the DUA you will upload:

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

Signed by

* First Name
* Last Name
Title
* Signed Date

DUA Contact Information

Use your information as the contact for this site

* DUA Organization
* Contact First Name
* Contact Last Name
Title
* Address
Address 2
* City
* State
* Zip Code
* Telephone number () - Ext.
Fax () -
* Email Address

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

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

Submit DUA: Select file

Note: Acceptable file format is .pdf.

No file selected.

* Select the sites that this DUA covers [Check All](#) [Uncheck All](#)

| Select | Site Name | Medicare Provider ID | Address 1 | Address 2 | City | State | Zip Code |
|--------------------------|--------------|----------------------|------------------|-----------|-----------|-------|----------|
| <input type="checkbox"/> | NH 2018 Test | 123113 | 123 Safe Home Rd | | Sopsville | AL | 12345 |

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Figure 2: Submit Questionnaire and Link Questionnaire to Nursing Home(s)

The screenshot shows the AHRQ website interface for submitting questionnaires. The header includes the AHRQ logo and the text "Agency for Healthcare Research and Quality" and "Advancing Excellence in Health Care". The URL "www.ahrq.gov" is visible in the top right. A navigation bar contains "Surveys on Patient Safety Culture" and links for "E-mail Updates", "Contact Us", "Site Map", and "Print Page". A search box is also present.

The main content area is titled "Questionnaires" and includes instructions for users. The instructions state: "To upload a questionnaire, click on 'Upload a questionnaire'." and "If you already have an approved questionnaire and you have added or replaced nursing homes using the same questionnaire, link your nursing homes 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 is located below the table, with a dropdown menu set to "Status" and a "Find" button.

The left sidebar contains a "Databases" menu with the following items: "Welcome", "Submitting Data" (with sub-items: "1. Enter Nursing Home Site Information", "2. Submit Data Use Agreement", "3. Submit Nursing Home Questionnaire", "4. Submit Respondent Level Data File(s)"), "Check Your Submission Status", "Your Account" (with sub-items: "Change Password", "Edit Contact Information"), and "Logout".

At the bottom of the sidebar, there is a "Stay Connected" section with the text "DatabasesOnSafetyCulture @westat.com" and the phone number "888-324-9790".

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Figure 2: Submit Questionnaire and Link Questionnaire to Nursing Home(s), continued

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

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Databases

Welcome

- Submitting Data
 1. Enter Nursing Home Site Information
 2. Submit Data Use Agreement
 3. **Submit Nursing Home 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
Surveys on Patient Safety Culture
OMB Control Number: 0935-0195, Expiration Date: 9/30/2018

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.

No file selected.

*** Language**

English
 Spanish
 Other

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

| Select | Site Name | Medicare Provider ID | Address 1 | Address 2 | City | State | Zip Code |
|--------------------------|--------------|----------------------|------------------|-----------|-----------|-------|----------|
| <input type="checkbox"/> | NH 2018 Test | 123113 | 123 Safe Home Rd | | Sopsville | AL | 12345 |

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Figure 3: Upload Data File for Each Participating Nursing Home

The screenshot displays the AHRQ website interface for submitting data files. At the top, there is a navigation bar with the U.S. Department of Health & Human Services logo and the AHRQ logo. Below this, a search bar and navigation links are visible. The main content area is titled 'Submit Respondent Level Data File(s)' and includes instructions for users. A table lists the submitted data files, with one entry shown: '1. Submit data file' with a status of 'Pending', Medicare Provider ID '123456', Site Name 'Sample Nursing Home', Address '123 Main Street', City 'Rockville', State 'MD', Denominator '11', and End Month/Year '1/2014'. The sidebar on the left contains a 'Databases' section and a 'Submit Respondent Level Data File(s)' section with a list of steps. A 'Stay Connected' button is located at the bottom left of the sidebar.

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- Check Your Submission Status**
- Your Account**
 - Change Password
 - Edit Contact Information
- Logout**

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

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 nursing home you are submitting data for to upload your file(s).
- View data specifications ([PDE](#), 174 KB, [PDF HELP](#))
- View sample data file ([XLSX](#), 13 KB)

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

| Submit | Status | Medicare Provider ID | Site Name | Address | City | State | Denominator | End Month/Year | Current Data File |
|-------------------------------------|---------|------------------------|-------------------------------------|-----------------|-----------|-------|-------------|----------------|-------------------|
| 1. Submit data file | Pending | 123456 | Sample Nursing Home | 123 Main Street | Rockville | MD | 11 | 1/2014 | |

<< Previous | Next >>

Search: Contains

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Figure 3: Upload Data File for Each Participating Nursing Home, continued

The screenshot displays the AHRQ website interface for submitting data. At the top, there are navigation links for 'U.S. Department of Health & Human Services' and 'www.hhs.gov', followed by the AHRQ logo and 'www.ahrq.gov'. The main header area includes 'SURVEYS ON PATIENT SAFETY CULTURE COMPARATIVE DATABASES' and a search bar. The left sidebar contains a 'Databases' menu with options like 'Submitting Data', 'Check Your Submission Status', and 'Your Account'. The main content area shows the 'Submit Data: Select file' step, which includes instructions to verify site information (Nursing Home Name and Address) and a file upload section with a 'Browse...' button and a 'Next >' button. A sample nursing home address is provided: 'Sample Nursing Home, 123 Main Street, Rockville MD, 20850'. A note specifies that only Excel files (.xls and .xlsx) are acceptable.

Skip Navigation

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Welcome, M

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

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

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

- Nursing Home Name, and
- Nursing Home 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.

Sample Nursing Home
123 Main Street
Rockville MD, 20850

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

No file selected.