

Appendix A –

Use of AHRQ Tools to Measure Aspects of Patient Safety Questionnaire

Form Approved OMB No. xxxx-xxxx Exp. Date xx/xx/21
--

Use of Agency for Healthcare Research and Quality (AHRQ) Tools to Measure Aspects of Patient Safety

INTRODUCTION: The Agency for Healthcare Research and Quality (AHRQ) would like to hear from you about tools to assess a safer patient environment in healthcare settings. Specifically, AHRQ would like to learn which of these tool(s) you recognize and/or are familiar to you. We estimate it will take you about 8 minutes to respond to these questions.

PLEASE TELL US ABOUT YOURSELF

- 1. Which of the following role(s) in the healthcare industry apply to you?**
(Please select all that apply.)

- ☐ Health care provider.
- ☐ Health care administrator – clinical.
- ☐ Health care administrator- non-clinical.
- ☐ Program or policy-maker.
- ☐ Researcher.
- ☐ Patient.
- ☐ Advocate.
- ☐ Other(s), please specify: _____

- 2. In which setting(s) do you currently work?** (Please select all that apply.)

- ☐ University or other academic setting.
- ☐ Other research organization.

- ☐ Healthcare – clinical.
- ☐ Government.
- ☐ Healthcare Association.
- ☐ Health Plan.
- ☐ Other(s), please specify: _____

3. Which of the following activities have you completed in the past two (2) years to assess or review patient safety in a healthcare facility? (Please select all that apply.)

- ☐ Completed a questionnaire(s) about patient safety in healthcare facilities.
- ☐ Reviewed adverse event reports about patient safety in healthcare facilities.
- ☐ Reviewed summary data about patient safety in healthcare facilities.
- ☐ Inspected facilities, offices, clinics, etc.
- ☐ Other, please specify: _____
- ☐ I've completed **NO** previous activities to assess or review patient safety in a healthcare facility in the past two years.

ASSESSING A SAFER PATIENT ENVIRONMENT IN HEALTH CARE SETTINGS

4. Which of the following that assess a health care setting's support for a safer patient environment are you familiar with? (Please select all that apply.)

- ☐ Patient Safety Climate in Healthcare Organizations Survey (PSCHO).
- ☐ Safety Attitudes Questionnaire (SAQ).
- ☐ Safety Organizing Scale (SOS).
- ☐ Surveys on Patient Safety Culture (SOPS).
- ☐ Other, please specify: _____

5. Which of the following do you think is the MOST well-known to those working on supporting a safer patient environment in U.S. healthcare settings?

- ☐ Patient Safety Climate in Healthcare Organizations Survey (PSCHO).
- ☐ Safety Attitudes Questionnaire (SAQ).
- ☐ Safety Organizing Scale (SOS).
- ☐ Surveys on Patient Safety Culture (SOPS).
- ☐ Don't know.

6. Which of the following is MOST commonly used to assess a safer patient environment in U.S. healthcare settings?

- ☐ Patient Safety Climate in Healthcare Organizations Survey (PSCHO).
- ☐ Safety Attitudes Questionnaire (SAQ).
- ☐ Safety Organizing Scale (SOS).
- ☐ Surveys on Patient Safety Culture (SOPS).
- ☐ Don't know.

7. Which of the following has/have been developed and/or disseminated by AHRQ? *(Please select all that apply.)*

- ☐ Patient Safety Climate in Healthcare Organizations Survey (PSCHO).
- ☐ Safety Attitudes Questionnaire (SAQ).
- ☐ Safety Organizing Scale (SOS).
- ☐ Surveys on Patient Safety Culture (SOPS).
- ☐ None of the above.

THANK YOU VERY MUCH FOR YOUR TIME AND RESPONSES!

This survey is authorized under 42 U.S.C. 299a. The confidentiality of your responses to this survey is protected by Sections 944(c) and 308(d) of the Public Health Service Act [42 U.S.C. 299c-3(c) and 42 U.S.C. 242m(d)]. Information that could identify you will not be disclosed unless you have consented to that disclosure. Public reporting burden for this collection of information is estimated to average 60 minutes per response, the estimated time required to complete the survey. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-XXXX) AHRQ, 5600 Fishers Lane, Room #07W42, Rockville, MD 20857.