

# ***Hospital Survey on Patient Safety Culture 2017 NYSPFP Report Overview***

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# Finding Your Report

Go to NYSPFP.org and log into the portal using your email address and NYSPFP password

Navigate to the “Data” section

Select the “Culture” initiative from the menu

Links to your report and related documentation will populate the page

The screenshot shows the NYSPFP Data Collection portal. At the top, there is a header with the NYSPFP logo and the text "New York State Partnership for Patients". Below the header is a navigation bar with links: myNYSPFP, CONTACTS, ABOUT, INITIATIVES, CALENDAR, and DATA. The DATA link is highlighted in blue. A red arrow points to the DATA link. Below the navigation bar, the page title is "NYSPFP Data Collection". There is a link to "Access the NYSPFP Dashboard". Below this are several links: Tutorials, Measurement Strategy and File Submission, CMS Z-5 Scoring Report, and Success Stories. A horizontal menu bar displays various initiatives: All, ADE, Falls, PU, VTE, CAUTI, CLABSI, ASP, Sepsis, SSI, VAE/Delirium, Culture, SPH, and Readmissions. The Culture link is highlighted in blue. A red arrow points to the Culture link. Below the menu bar, there are two main sections: "Culture and Leadership" and "Reports". The "Culture and Leadership" section has a sub-section "Data Collection" with links to "Submit Patient and Family Engagement Assessment" and "Submit Leadership Assessment". The "Reports" section has a sub-section "Race, Ethnicity and Language (REaL) Data Report" with links for 2017 and 2016, and a "2017 Culture of Safety Survey" with a link to "Hospital Specific Results". A red box highlights the "Reports" section.

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES  
New York State  
Partnership  
for Patients

A partnership of the Healthcare Association of New York State  
and the Greater New York Hospital Association.

myNYSPFP  
CONTACTS  
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DATA

NYSPFP Data Collection

Access the [NYSPFP Dashboard](#)

[Tutorials](#)  
[Measurement Strategy and File Submission](#)  
[CMS Z-5 Scoring Report](#)  
[Success Stories](#)

Menu

Display Initiative: [All](#) [ADE](#) [Falls](#) [PU](#) [VTE](#) [CAUTI](#) [CLABSI](#) [ASP](#) [Sepsis](#) [SSI](#) [VAE/Delirium](#) [Culture](#) [SPH](#) [Readmissions](#)

Building Culture and Leadership

Culture and Leadership

Data Collection

- [Submit Patient and Family Engagement Assessment](#)
- [Submit Leadership Assessment](#)

Reports

Race, Ethnicity and Language (REaL) Data Report

- 2017: [Description](#) | [Report](#)
- 2016: [Description](#) | [Report](#)

2017 Culture of Safety Survey

- [Hospital Specific Results](#)

# General Survey Structure

- Patient safety culture domains
  - 3 to 4 questions for respondents to rate (scale=5)
    - Strongly agree to strongly disagree
    - Never to always
  - 1 composite
    - Average of scores for the individual questions
- Question to grade the hospital's patient safety
- Question to quantify the number of event reports the respondent has submitted
- Demographic questions for respondents

# Survey Content

Patient Safety Culture Composite	Definition: <i>The extent to which...</i>
1. Communication openness	Staff freely speak up if they see something that may negatively affect a patient and feel free to question those with more authority.
2. Feedback and communication about error	Staff are informed about errors that happen, are given feedback about changes implemented, and discuss ways to prevent errors.
3. Frequency of events reported	Mistakes of the following types are reported: (1) mistakes caught and corrected before affecting the patient, (2) mistakes with no potential to harm the patient, and (3) mistakes that could harm the patient but do not.
4. Handoffs and transitions	Important patient care information is transferred across hospital units and during shift changes.
5. Management support for patient safety	Hospital management provides a work climate that promotes patient safety and shows that patient safety is a top priority.
6. Nonpunitive response to error	Staff feel that their mistakes and event reports are not held against them and that mistakes are not kept in their personnel file.
7. Organizational learning—Continuous improvement	Mistakes have led to positive changes and changes are evaluated for effectiveness.
8. Overall perceptions of patient safety	Procedures and systems are good at preventing errors and there is a lack of patient safety problems.
9. Staffing	There are enough staff to handle the workload and work hours are appropriate to provide the best care for patients.
10. Supervisor/manager expectations and actions promoting patient safety	Supervisors/managers consider staff suggestions for improving patient safety, praise staff for following patient safety procedures, and do not overlook patient safety problems.
11. Teamwork across units	Hospital units cooperate and coordinate with one another to provide the best care for patients.
12. Teamwork within units	Staff support each other, treat each other with respect, and work together as a team.

# Calculation and Interpretation

- Domain questions may be positively or negatively worded in the survey
  - Example of a positively worded question:
    - “Patient safety is never sacrificed to get more work done”
  - Example of a negatively worded question:
    - “We have patient safety problems in this unit”
- In all cases, a **percent positive score** is calculated for each domain question
  - Numerator: count of all positive responses
  - Denominator: count of all responses

# Calculation and Interpretation

- If the question is positively worded, we count all instances of:
  - strongly agree / agree responses
  - always / most of the time responses
- If the question is negatively worded, we count all instances of:
  - strongly disagree / disagree responses
  - never / rarely responses
- The end result is that the interpretation for all questions and domains will always be towards **positive** achievement

# Sections of the Excel Report

Navigate throughout the workbook via the **Table of Contents** – all report charts and tables are hyperlinked.

## Comparative Reports

- Utilizes data from previous iterations of the AHRQ Hospital COS Survey conducted as part of NYSPFP
- High-level summary comparisons only

## Annual Reports

- Utilizes data for the current year's survey
- High-level summary and detailed information available

### Hospital Survey on Patient Safety Culture

#### Table of Contents

Comparison of Overall Patient Safety Statistics, 2012-2017	
<a href="#">Compare Hospital Measures</a>	<i>Composite Statistics of Overall Hospital Safety Measurements</i>
<a href="#">Compare Work Area Measures</a>	<i>Composite Statistics of Safety Measurements for Work Areas/Units</i>
<a href="#">Compare Overall Safety Grade</a>	<i>Overall Patient Safety Grade - All Respondents by Selected Work Area</i>

2017 AHRQ Culture of Safety Survey Report	
<a href="#">Summary Hospital Measures</a>	<i>Composite Statistics of Overall Hospital Safety Measurements</i>
<a href="#">Summary Work Area Measures</a>	<i>Composite Statistics of Safety Measurements for Work Areas/Units</i>
<a href="#">Overall Safety Grade</a>	<i>Overall Patient Safety Grade - All Respondents by Work Area/Unit</i>
<a href="#">Number of Events Table</a>	<i>Number of Events Reported by Work Area/Unit</i>
<a href="#">Perception of Safety</a>	<i>Domain: Overall Perception of Safety</i>
<a href="#">Teamwork Within Units</a>	<i>Domain: Teamwork Within Units</i>
<a href="#">Learning and Improvement</a>	<i>Domain: Organizational Learning - Continuous Improvement</i>
<a href="#">Staffing</a>	<i>Domain: Staffing</i>
<a href="#">Response to Error</a>	<i>Domain: Nonpunitive Response to Error</i>
<a href="#">Supervisors</a>	<i>Domain: Supervisor Expectations and Actions Promoting Safety</i>
<a href="#">Communication</a>	<i>Domain: Communication Openness</i>
<a href="#">Error Feedback</a>	<i>Domain: Feedback and Communication About Error</i>
<a href="#">Event Reporting</a>	<i>Domain: Frequency of Events Reported</i>
<a href="#">Hospital Management</a>	<i>Domain: Hospital Management Support for Patient Safety</i>
<a href="#">Teamwork Across Units</a>	<i>Domain: Teamwork Across Hospital Units</i>
<a href="#">Handoffs and Transitions</a>	<i>Domain: Hospital Handoffs and Transitions</i>
<a href="#">Demographics Table</a>	<i>Respondent Demographics</i>
<a href="#">Data Table</a>	<i>Patient Safety Culture Scores Compared to NYSPFP and National Benchmarks</i>
<a href="#">Unit-Level Table</a>	<i>Patient Safety Culture Scores by Specific Unit</i>

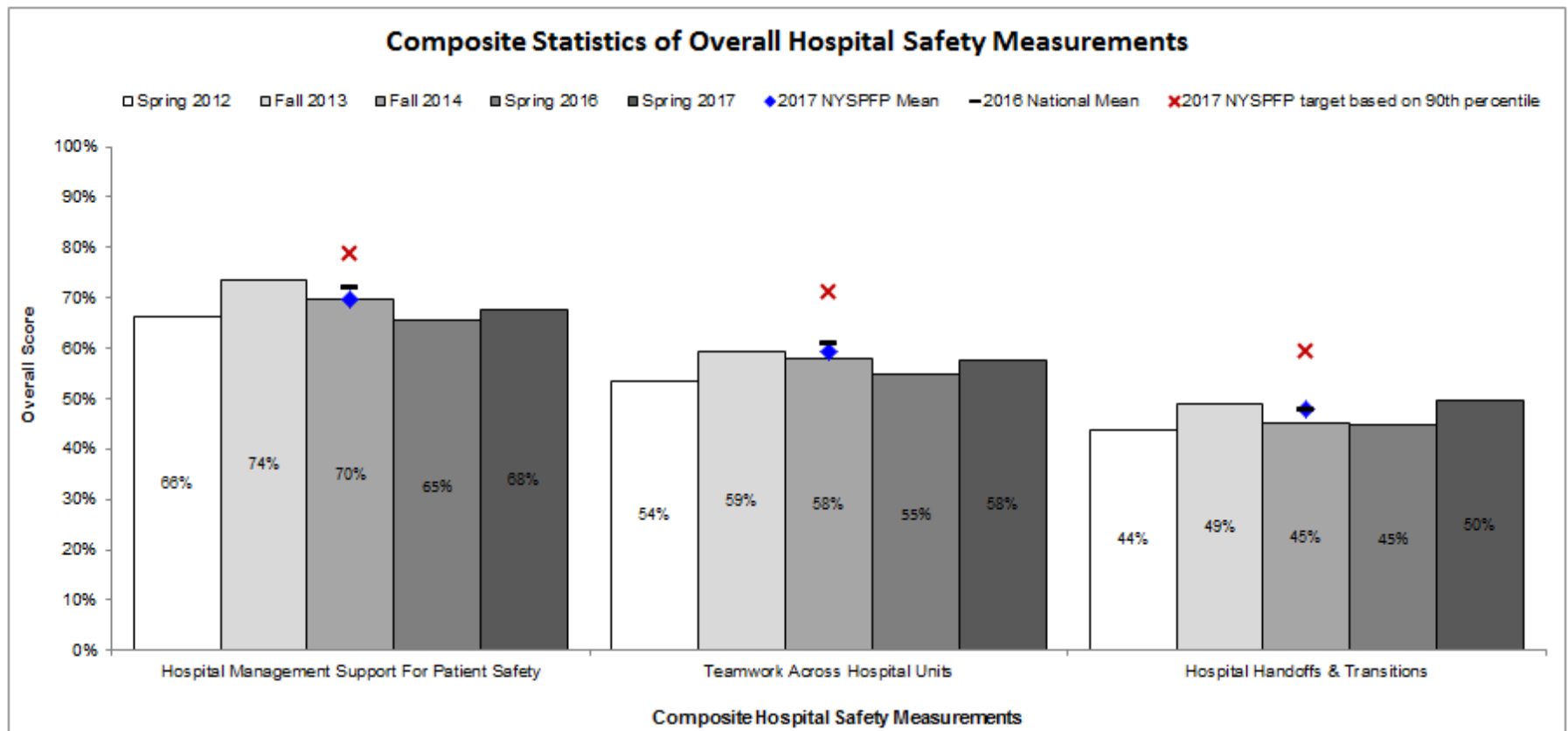
# Historical Comparative Reports

- Three main charts with historic comparative statistics from prior survey iterations:
  - Compare Hospital Measures
    - Domains that focus on the hospital overall
  - Compare Work Area Measures
    - Domains that focus on your primary work area/unit
  - Compare Overall Safety Grade
    - Respondent rated patient safety grade for select units
- If your hospital participated in the survey with NYSPFP in prior years, those results were brought in
- Other comparative statistics included for measures:
  - NYSPFP 90<sup>th</sup> Percentile, NYSPFP Mean, National Mean



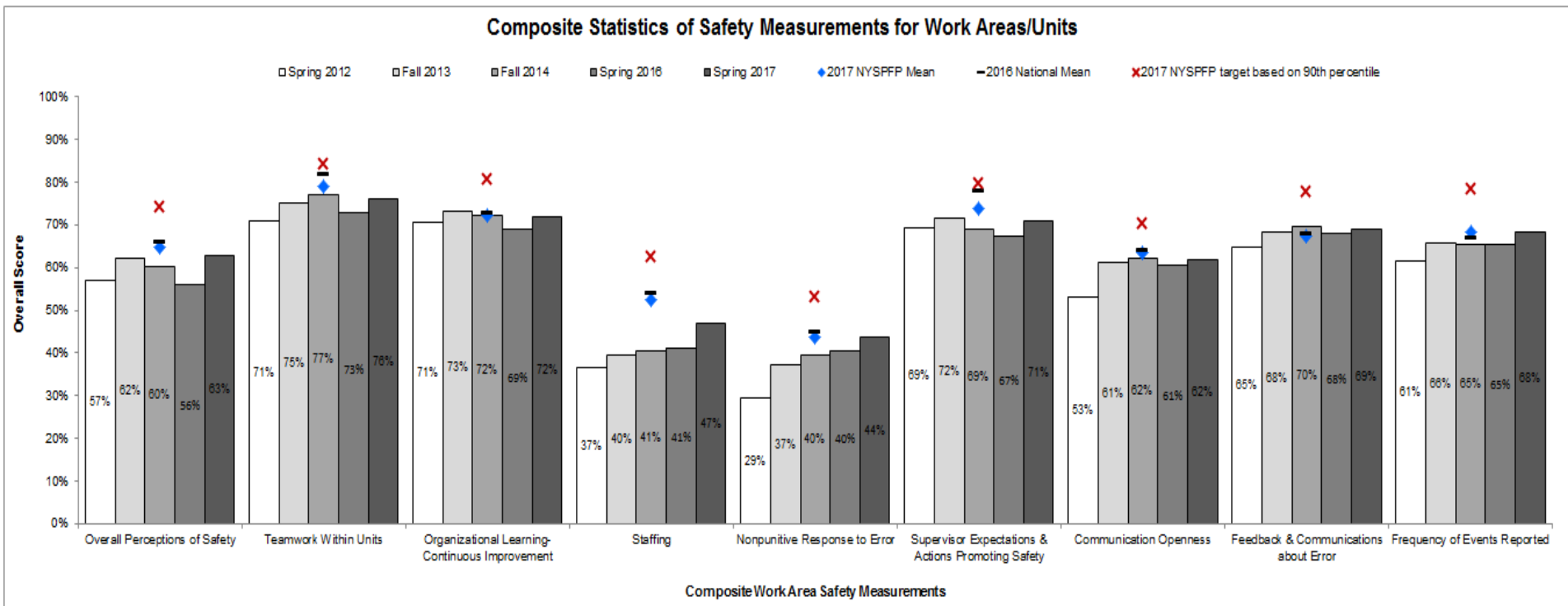
# Historical Comparative Reports

## Compare Hospital Measures



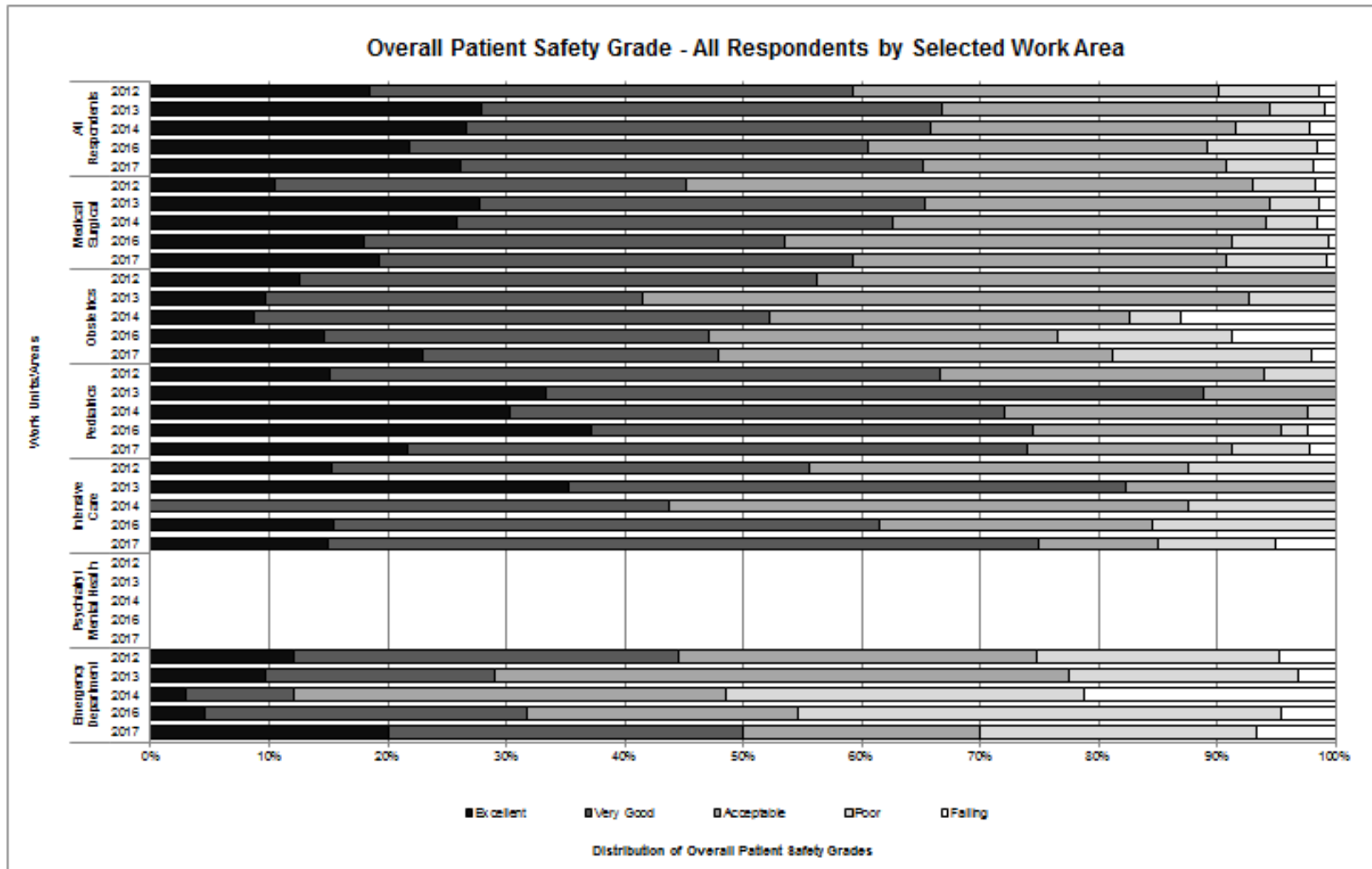
# Historical Comparative Reports

## Compare Work Area Measures



# Historical Comparative Reports

## Compare Overall Safety Grade



# Summary Reports

- Three main charts with comparative statistics for the current year's survey only:
  - Summary Hospital Measures
    - Domains that focus on the hospital overall
  - Summary Work Area Measures
    - Domains that focus on your primary work area/unit
  - Overall Safety Grade
    - Respondent rated patient safety grade for select units
- Other comparative statistics included for measures:
  - NYSPFP 90th Percentile
  - NYSPFP Mean
  - National Mean

# Number of Events Table

- Focus on the survey item asking:
  - *In the last 12 months, how many event reports have you filled out and submitted?*
- Table displays the distribution of responses stratified by primary work area/unit

Anywhere General Hospital - AHRQ Culture of Safety Survey Results  
Hospital Response Rate = 33%

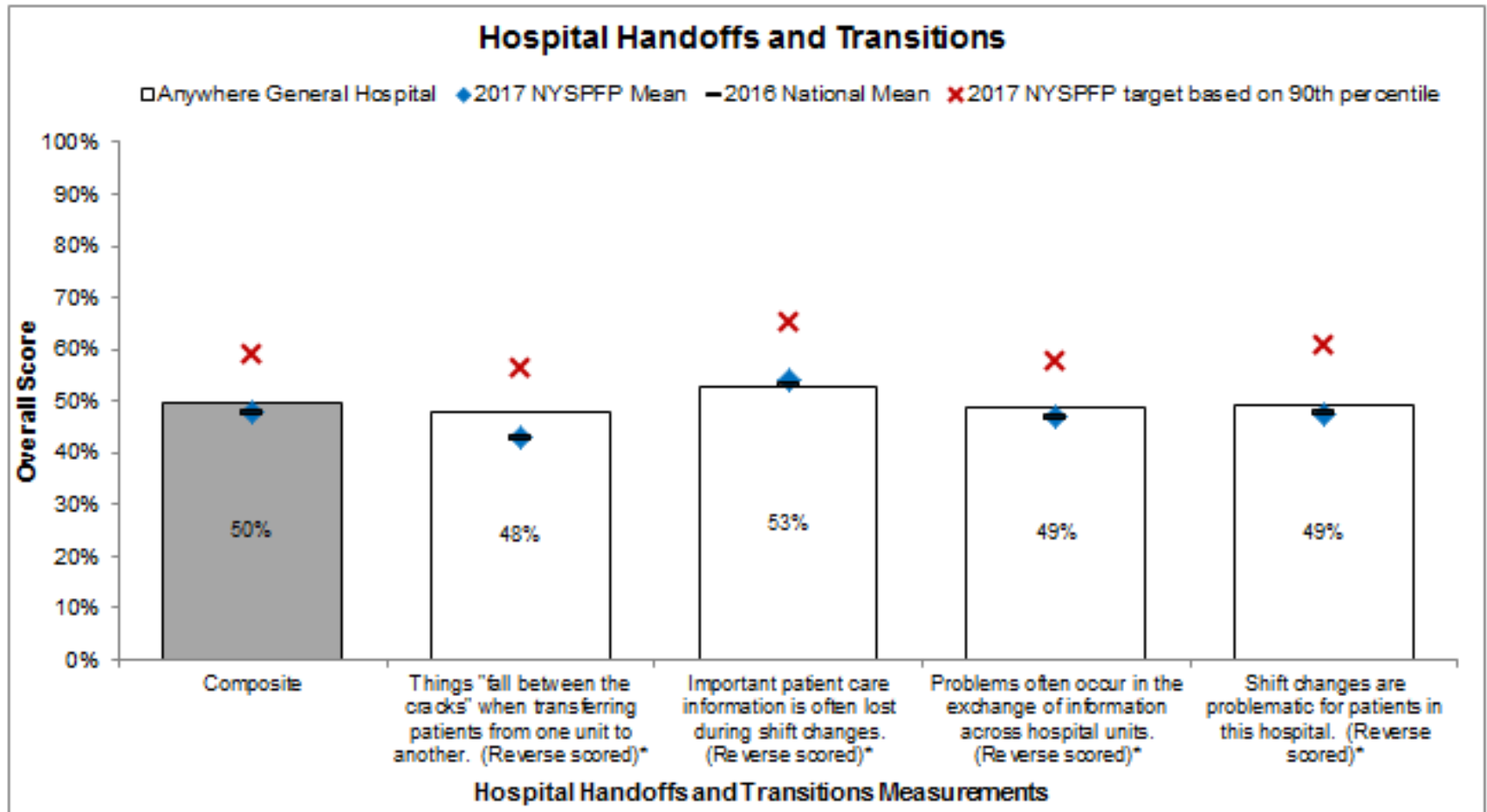
Table 1 - Number of Events Reported by Work Area/ Unit

In the past 12 months, how many event reports have you filled out and submitted?	Medicine	Surgery	Obstetrics	Pediatrics	Emergency Department	Intensive Care	Psychiatry/ Mental Health	Rehabilitation	Pharmacy	Laboratory	Radiology	Anesthesiology / Operating Room	All Respondents
Number of Respondents	84	48	45	44	30	19	*	28	18	20	16	*	585
No event reports	64%	65%	49%	77%	37%	37%	*	93%	50%	65%	63%	*	66%
1 to 2 event reports	23%	25%	44%	16%	43%	58%	*	7%	17%	15%	19%	*	23%
3 to 5 event reports	7%	8%	7%	7%	7%	0%	*	0%	17%	10%	13%	*	7%
6 to 10 event reports	2%	2%	0%	0%	7%	5%	*	0%	17%	0%	0%	*	2%
11 to 20 event reports	0%	0%	0%	0%	3%	0%	*	0%	0%	5%	0%	*	1%
21 event reports or more	4%	0%	0%	0%	3%	0%	*	0%	0%	5%	6%	*	1%

# Domain Specific Charts

- Vertical bar charts which display the scores for a specific domain
  - Composite score
  - Individual survey item scores
  - Comparative statistics:
    - NYSPFP 90<sup>th</sup> Percentile
    - NYSPFP Mean
    - National Mean
- Each survey domain will have it's own chart listed on a separate worksheet

# Domain Specific Charts



# Demographics Table

- Summarizes the demographic characteristics of participating staff.
- Statistics provided include:
  - Frequency of response
  - Percent of total responses (your hospital distribution)
  - Percent of total responses (NYSPFP distribution)
- Statistics from prior iterations of the survey are presented beside the current period



# Demographics Table

## Anywhere General Hospital - AHRQ Culture of Safety Survey Results

Hospital Response Rate = 33%

Table 2 - Demographics Table for Survey Respondents

Year of Survey	Spring 2012			Fall 2013			Fall 2014			Spring 2016			Spring 2017		
	The Brooklyn Hospital Center	The Brooklyn Hospital Center	NYSPPF Hospitals	The Brooklyn Hospital Center	The Brooklyn Hospital Center	NYSPPF Hospitals	The Brooklyn Hospital Center	The Brooklyn Hospital Center	NYSPPF Hospitals	The Brooklyn Hospital Center	The Brooklyn Hospital Center	NYSPPF Hospitals	The Brooklyn Hospital Center	The Brooklyn Hospital Center	NYSPPF Hospitals
<b>Number of Respondents</b>	<b>1,075</b>		<b>67,477</b>	<b>865</b>		<b>53,078</b>	<b>824</b>		<b>53,400</b>	<b>703</b>		<b>70,605</b>	<b>630</b>		<b>32,819</b>
	Number of responses	% of total responses	% of total responses	Number of responses	% of total responses	% of total responses	Number of responses	% of total responses	% of total responses	Number of responses	% of total responses	% of total responses	Number of responses	% of total responses	% of total responses
<b>Number of years worked in this hospital?</b>															
Less than 1 year	101	9%	3%	150	17%	8%	114	14%	10%	31	13%	10%	70	11%	10%
1 to 5 years	320	30%	23%	268	31%	28%	303	37%	26%	283	40%	25%	234	37%	28%
6 to 10 years	160	15%	20%	138	16%	20%	119	14%	22%	109	16%	18%	89	14%	18%
11 to 15 years	110	10%	12%	86	10%	13%	82	10%	13%	59	8%	12%	57	9%	13%
16 to 20 years	127	12%	8%	54	6%	8%	55	7%	8%	36	5%	8%	48	8%	9%
21 years or more	158	15%	17%	126	15%	17%	39	12%	16%	85	12%	15%	104	17%	18%
<b>Number of years worked in this current hospital work area/unit?</b>															
Less than 1 year	121	11%	12%	173	20%	11%	147	18%	13%	108	15%	14%	88	14%	14%
1 to 5 years	376	35%	35%	283	33%	35%	327	40%	32%	316	45%	34%	254	40%	35%
6 to 10 years	188	17%	20%	149	17%	20%	122	15%	22%	100	14%	18%	95	15%	18%
11 to 15 years	120	11%	12%	35	11%	12%	65	8%	12%	51	7%	11%	55	9%	12%
16 to 20 years	91	8%	7%	52	6%	6%	44	5%	7%	27	4%	6%	40	6%	8%
21 years or more	84	8%	3%	69	8%	3%	60	7%	3%	57	8%	3%	67	11%	3%



Demographic questions  
asked of survey  
participants



Statistics provided for  
each iteration of the  
survey

# Data Table

- Individual survey items are organized by patient safety culture domains
- Previous scores from prior iterations of the survey are presented beside the current period (listed as Spring 2017)
- Comparative information included:
  - NYSPFP Distribution
  - NYSPFP Mean
  - National Mean

# Data Table

## Anywhere General Hospital - AHRQ Culture of Safety Survey Results Hospital Response Rate = 33%

Table 3 - Data Table of Culture of Safety Domains

Overall Perception of Safety	The Brooklyn Hospital Center					2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Mean	2016 National Mean
	Spring 2012	Fall 2013	Fall 2014	Spring 2016	Spring 2017						
<i>Composite</i>	57%	62%	60%	56%	63%	61%	66%	72%	74%	65%	66%
Patient safety is never sacrificed to get more work done.	63%	70%	68%	61%	70%	63%	68%	72%	76%	66%	64%
Our procedures and systems are good at preventing errors from happening.	65%	68%	69%	62%	70%	66%	72%	76%	81%	72%	73%
It is just by chance that more serious mistakes don't happen around here. (Reverse scored)	46%	51%	47%	46%	52%	51%	53%	63%	70%	58%	61%
We have patient safety problems in this unit. (Reverse scored)	52%	53%	57%	54%	58%	55%	64%	69%	76%	63%	65%
Teamwork Within Units	The Brooklyn Hospital Center					2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Mean	2016 National Mean
	Spring 2012	Fall 2013	Fall 2014	Spring 2016	Spring 2017						
<i>Composite</i>	71%	75%	77%	73%	76%	76%	80%	82%	84%	79%	82%
People support one another in this unit.	77%	81%	85%	79%	81%	82%	86%	88%	91%	85%	87%
When a lot of work needs to be done quickly, we work together as a team to get the work done.	76%	80%	82%	76%	82%	83%	86%	88%	91%	85%	87%
In this unit, people treat each other with respect.	71%	75%	79%	73%	76%	74%	78%	82%	84%	78%	81%
When one area in this unit gets really busy, others help out.	60%	65%	62%	63%	65%	63%	68%	71%	76%	68%	71%
Organizational Learning - Continuous Improvement	The Brooklyn Hospital Center					2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Mean	2016 National Mean
	Spring 2012	Fall 2013	Fall 2014	Spring 2016	Spring 2017						
<i>Composite</i>	71%	73%	72%	69%	72%	63%	73%	76%	81%	72%	73%
We are actively doing things to improve patient safety.	83%	84%	82%	79%	81%	80%	83%	87%	90%	83%	84%
Mistakes have led to positive changes here.	59%	62%	64%	60%	62%	59%	64%	68%	71%	63%	64%
After we make changes to improve patient safety, we evaluate their effectiveness.	71%	74%	71%	67%	73%	66%	73%	77%	81%	71%	70%
Staffing	The Brooklyn Hospital Center					2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Percentile	2017 NYSFPF Mean	2016 National Mean
	Spring 2012	Fall 2013	Fall 2014	Spring 2016	Spring 2017						
<i>Composite</i>	37%	40%	41%	41%	47%	47%	51%	56%	62%	52%	54%
We have enough staff to handle the workload.	31%	37%	47%	39%	47%	43%	49%	54%	63%	49%	51%
Staff in this unit work longer hours than is best for patient care. (Reverse scored)	30%	33%	32%	34%	32%	41%	46%	53%	59%	47%	50%
We use more temporary staff than is best for patient care. (Reverse scored)	51%	50%	46%	54%	61%	58%	63%	70%	75%	64%	65%
We work in "crisis mode" trying to do too much, too quickly. (Reverse scored)	34%	38%	38%	38%	48%	41%	48%	53%	63%	48%	49%

Survey items  
organized by patient  
safety culture domain

Scores for the current  
survey and prior  
iterations

Comparative information:  
NYSFPF distribution, NYSFPF  
mean, Natation mean

# Unit-Level Table

- Hospitals that participated with NYSPFP had the option to provide a specific unit list for participants to choose from
  - This report corresponds to these hospitals only!
- The units displayed were defined by each facility and are independent from the AHRQ-defined units used in all other areas of the report
- The table contains percent positive scores for each question and domain by this unit type
- Survey data is displayed only for specific units with 10 or greater responses
- Units with 10 or less responses are listed at the top of the table for your reference

# Unit-Level Table

## Anywhere General Hospital - AHRQ Culture of Safety Survey Results

Hospital Response Rate = 33%

Table 4 - Data Table of Culture of Safety Domains by Specific Unit

NOTE: Survey data will be displayed only for specific units with sufficient reporting (units with 10 or greater responses). Unit names will be displayed in order of descending respondent volume. Data will not be displayed for the following units with insufficient reporting: Unit 7, Unit 8, Unit 9, Unit 10, Unit 11, Unit 12, Unit 13, Unit 14, Unit 15, Unit 16, Unit 17.

Specific Unit	Unit 1	Unit 2	Unit 3	Unit 4	Unit 5	Unit 6
Number of Respondents	37	33	25	22	21	20
<b>Overall Perception of Safety</b>						
<i>Composite</i>	68%	62%	69%	43%	36%	54%
Patient safety is never sacrificed to get more work done.	63%	73%	75%	48%	43%	73%
Our procedures and systems are good at preventing errors from happening.	81%	76%	78%	55%	43%	80%
It is just by chance that more serious mistakes don't happen around here. (Reverse scored)*	65%	38%	56%	36%	19%	78%
We have patient safety problems in this unit. (Reverse scored)*	59%	55%	67%	32%	38%	88%
<b>Teamwork Within Units</b>						
<i>Composite</i>	74%	76%	76%	72%	56%	79%
People support one another in this unit.	73%	85%	80%	82%	65%	80%
When a lot of work needs to be done quickly, we work together as a team to get the work done.	84%	76%	84%	82%	76%	85%
In this unit, people treat each other with respect.	65%	76%	72%	86%	48%	68%
When one area in this unit gets really busy, others help out.	62%	69%	68%	36%	43%	83%



Survey items  
organized by patient  
safety culture domain




Scores for the current  
survey by specific unit

# Raw Data

- Use for your own internal analysis
- Fields marked with a hyphen “-” represent blank survey responses
- Fields marked with an asterisk “\*” represent responses that have been blinded to protect the identity of the participant
  - Applies to questions where the participant is asked to identify their primary work area/unit and their staff position

# Raw Data

		New York State Partnership for Patients		Table 5 - AHRQ Culture of Safety Survey Raw Data														
				Asterisk (*) if fewer than 10 respondents reported the same value Hyphen (-) if no response was provided for the survey item														
		Primary Work Area *	Primary Work Area Other*	Name of unit as instructed by hospital*	People support one another	We have enough staff to handle the workload	When a lot of work needs to be done quickly, we work together	People treat each other with respect	Staff work longer hours than is best	We are actively doing things to improve patient safety	We use more agency staff than is best	Staff feel like their mistakes are held against them	Mistakes have led to positive changes	Is it just by chance that more serious mistakes don't happen	When one area gets really busy, others help out	When an event is reported, it feels like the person is being written up, not the problem		
PFI	FACILITY NAME	Ai	Ai_o	Ai_unit	A01	A02	A03	A04	A05	A06	A07	A08	A09	A10	A11	A12		
XXXX	Anywhere Ger	n	-	*	4	1	3	3	4	3	1	2	3	4	4	2		
XXXX	Anywhere Ger	o	-	*	4	2	3	4	2	4	2	3	4	2	-	-		
XXXX	Anywhere Ger	j	-	-	5	2	4	4	3	-	1	3	3	2	4	3		
XXXX	Anywhere Ger	*	-	-	5	3	5	5	3	3	3	2	4	1	5	1		
XXXX	Anywhere Ger	q	-	*	1	2	1	1	2	4	3	2	5	5	1	2		
XXXX	Anywhere Ger	i	-	-	5	3	5	-	-	-	3	3	4	4	4	3		
XXXX	Anywhere Ger	k	-	*	3	1	3	3	3	5	2	3	1	4	1	2		
XXXX	Anywhere Ger	n	*	-	-	-	-	-	-	-	-	-	-	-	-	-		
XXXX	Anywhere Ger	j	-	-	5	3	4	4	4	4	3	3	4	3	4	3		
XXXX	Anywhere Ger	j	-	*	5	3	4	5	5	5	3	2	3	3	4	3		
XXXX	Anywhere Ger	c	-	*	3	3	3	3	3	2	3	5	2	3	3	5		
Handoffs and Transitions		Demographics Table		Data Table		Unit-Level Table		Raw Data										

Note: This sample uses randomized example data.