



Culture of Safety Survey Registration Guide

Use this document to guide you through the upcoming Culture of Safety Survey registration process. All hospitals, regardless of participation level, will be asked to register.

General survey registration

Contact information should be entered for the COS hospital lead/liaison during registration. This is the key point person for the COS Survey, and this person will have access to survey participation data and results.

Registration Form

First Name :	Last Name :	Title :
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email :	Phone Number :	
<input type="text"/>	<input type="text"/>	

Please indicate your participation level in the EQIC COS Survey by selecting one of the following options:

Please indicate participation level

- ☐ My hospital will participate in the survey.
- ☐ My hospital will not participate in the survey.
- ☐ We have participated in the AHRQ Culture of Safety Survey Version 2.0 in the last 12 months and will submit data to EQIC.

My hospital will participate in the survey

If your hospital will be participating in the survey, please proceed with the rest of the registration.

My hospital will not participate in the survey

If your hospital will NOT be participating in the COS Survey with EQIC, your registration is complete once you select this option.

We have participated in the AHRQ Culture of Safety Survey Version 2.0 in the last 12 months and will submit data to EQIC

If your hospital chooses this option, the following message will appear and the contact listed will receive instructions via email to complete the submission of your previous AHRQ Version 2.0 survey data to EQIC.

Please review the registrant's name and email address below to ensure it reflects the correct contact information for the point person for the EQIC Culture of Safety Survey at your

hospital. This contact will receive email instructions on how to submit data from a previous survey if the hospital has completed a Culture of Safety Survey in the past 12 months.

If your hospital will be participating in the COS Survey with EQIC, please select from one of the following options to indicate your survey preference:

Please indicate which survey option your hospital chooses :

- ☐ Core Hospital Survey 2.0
- ☐ Health Information Technology Patient Safety Supplemental Items
- ☐ Value and Efficiency Supplemental Items
- ☐ Workplace Safety Supplemental Items

Enter the number of eligible staff expected to complete the survey specifications. This is the overall denominator for the hospital or the total number of employees that are eligible to complete the survey.

In order to calculate your organization's response rate, please submit to total number of eligible employees you will be asking to complete the survey (denominator) :

Unit-level registration

Hospitals have the option to submit a hospital-specific list and receive department/unit-specific data and reports.

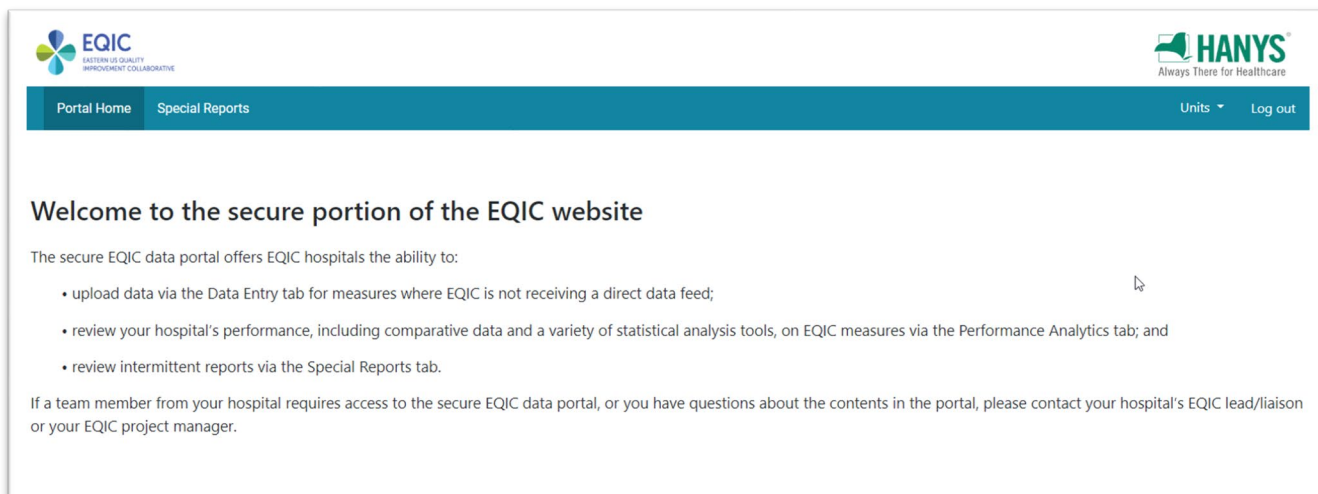
Would you like to submit a hospital-specific list of department/unit names in order to receive department/unit specific data? :

☐ Yes ☐ No

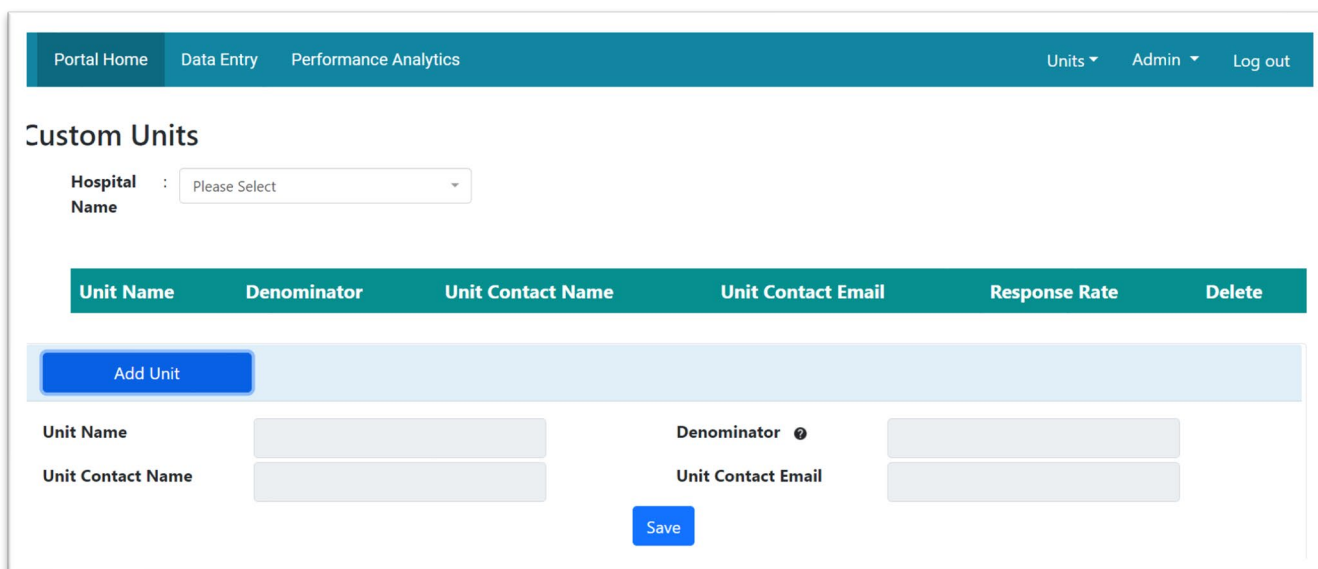
If 'yes' is chosen, the following message will appear and your COS liaison will receive an email with instructions to submit your hospital-specific list of units/departments.

Please review the registrant's name and email address below to ensure it reflects the correct contact information for the point person for the EQIC Culture of Safety Survey at your hospital. This contact will receive email instructions on how to submit a hospital-specific list of the unit- or department-specific denominators before the administration of the survey.

In the registration confirmation email, there will be a link to the EQIC data portal homepage. Once you log into the portal, navigate to the units tab to complete the 'Custom Units' submission page.



The screenshot shows the EQIC data portal homepage. The header includes the EQIC logo, navigation links for 'Portal Home' and 'Special Reports', and a 'Units' dropdown menu with a 'Log out' link. The main content area welcomes users to the secure portion of the website and lists the capabilities of the secure EQIC data portal: uploading data via the Data Entry tab, reviewing hospital performance via the Performance Analytics tab, and reviewing intermittent reports via the Special Reports tab. It also provides contact information for hospital EQIC leads or project managers.



The screenshot shows the 'Custom Units' submission page. The header includes the EQIC logo, navigation links for 'Portal Home', 'Data Entry', and 'Performance Analytics', and a 'Units' dropdown menu with 'Admin' and 'Log out' links. The main content area has a 'Hospital Name' dropdown menu. Below this is a table with columns: 'Unit Name', 'Denominator', 'Unit Contact Name', 'Unit Contact Email', 'Response Rate', and 'Delete'. An 'Add Unit' button is located below the table. Below the button are input fields for 'Unit Name', 'Unit Contact Name', 'Denominator', and 'Unit Contact Email', followed by a 'Save' button.







Unit/department list submission instructions:

1. Select your hospital name from the drop-down list.
2. Click 'Add Unit' and enter each unit/department name and denominator.
3. To grant a unit/department leader or manager access to their real-time survey response rates during the survey and post-survey data, enter their contact name and email address.
4. Click 'Save' before proceeding to the next entry.

If your hospital provided units for last year's survey, you can update the existing unit list by selecting the "edit" button on the user list. You can then change the unit name, contact name, contact email or denominator as necessary.

Units

Hospital Name : Survey Year :

Unit Name	Denominator	Unit Contact Name	Unit Contact Email	Actions
3 North	18	Tom Jones	tjones@testhospital.org	 
3 South	27	Bill Smith	bsmith@testhospital.org	 
ICU	21	Barb Johnson	bjohnson@testhospital.org	 

Test Hospital

×

Update unit and contact name and email address below.

Unit

3 North

Contact Name

Tom

Jones

Contact Email

tjones@testhospital.org

Denominator ?

18

Cancel

Save

Questions

Please contact your EQIC project manager for further assistance.