Surveys on Patient Safety Culture[™] (SOPS[®]) Ambulatory Surgery Center Survey: 2021 User Database Report

Part II: Appendix A—Results by Facility Characteristics Appendix B—Results by Respondent Characteristics

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Table of Contents

Section	Page
Executive Summary	
Part II—Appendixes A and B: Overall Results by Facility and Respondent Characteristics	1
Appendix A: Results by Facility Characteristics	4
(1) Number of Operating/Procedure Rooms(2) Geographic Region	
Appendix B: Overall Results by Respondent Characteristics	
(1) Staff Position	



List of Tables

Table

Table A-1.	Composite Measure Average Percent Positive Response by Number of
	Operating/Procedure Rooms – 2021 SOPS ASC Database
Table A-2.	Item Average Percent Positive Response by Number of
	Operating/Procedure Rooms – 2021 SOPS ASC Database
Table A-3.	Item Average Percentages for Near-Miss Documentation by Number of
	Operating/Procedure Rooms – 2021 SOPS ASC Database
Table A-4.	Average Percentage of Respondents Giving Their Ambulatory Surgery
	Center an Overall Rating on Patient Safety by Number of
	Operating/Procedure Rooms – 2021 SOPS ASC Database
Table A-5.	Item Average Percent Positive Response for Communication in the
	Surgery/Procedure Room by Number of Operating/Procedure Rooms –
	2021 SOPS ASC Database
Table A-6.	Composite Measure Average Percent Positive Response by Geographic
	Region – 2021 SOPS ASC Database
Table A-7.	Item Average Percent Positive Response by Geographic Region – 2021
	SOPS ASC Database14
Table A-8.	Item Average Percentages for Near-Miss Documentation by Geographic
	Region – 2021 SOPS ASC Database
Table A-9.	Average Percentage of Respondents Giving Their Ambulatory Surgery
	Center an Overall Rating on Patient Safety by Geographic Region –
	2021 SOPS ASC Database
Table A-10.	Item Average Percent Positive Response for Communication in the
	Surgery/Procedure Room by Geographic Region – 2021 SOPS ASC
	Database
Table B-1.	Composite Measure Average Percent Positive Response by Staff
	Position - 2021 SOPS ASC Database
Table B-2.	Item Average Percent Positive Response by Staff Position – 2021 SOPS
	ASC Database
Table B-3.	Item Average Percentages for Near-Miss Documentation by Staff
	Position – 2021 SOPS ASC Database
Table B-4.	Average Percentage of Respondents Giving Their Ambulatory Surgery
	Center an Overall Rating on Patient Safety by Staff Position – 2021
	SOPS ASC Database
Table B-5.	Item Average Percent Positive Response for Communication in the
-	Surgery/Procedure Room by Staff Position – 2021 SOPS ASC
	Database

Table B-6.	Composite Measure Average Percent Positive Response by Hours	
	Worked Per Week - 2021 SOPS ASC Database	30
Table B-7.	Item Average Percent Positive Response by Hours Worked Per Week –	
	2021 SOPS ASC Database	31
Table B-8.	Item Average Percentages for Near-Miss Documentation by Hours	
	Worked Per Week – 2021 SOPS ASC Database	34
Table B-9.	Average Percentage of Respondents Giving Their Ambulatory Surgery	
	Center an Overall Rating on Patient Safety by Hours Worked Per	
	Week – 2021 SOPS ASC Database	35
Table B-10.	Item Average Percent Positive Response for Communication in the	
	Surgery/Procedure Room by Hours Worked Per Week – 2021 SOPS	
	ASC Database	36



Executive Summary

Part II—Appendixes A and B: Overall Results by Facility and Respondent Characteristics

The tables provided in Appendixes A and B present average percent positive scores on the survey composite measures and items across database ambulatory surgery centers (ASCs). They are broken down by the following ASC and respondent characteristics.

Appendix A: Overall Results by Facility Characteristics

- Number of Operating/Procedure Rooms
- Geographic Region

Appendix B: Overall Results by Respondent Characteristics

- Staff Position
- Hours Worked per Week

Highlights from results by select facility and respondent characteristics are presented at the end of the main report and are also shown on the next two pages. Highlights were based on results for the eight SOPS composite measures, a single question about near-miss documentation, the overall patient safety rating, and questions about communication in the surgery/procedure room. The bottom rows of the composite measure tables present the composite measure average as a summary statistic for comparing breakout categories.

Data Limitations

This report has the following limitations:

- The database for the 2021 report includes only 235 ASCs, which represent less than 1 percent of the total number of ASCs in the United States.
- The average percent positive scores on the survey's composite measures are much higher for ASCs participating in the 2021 database compared with patient safety culture results presented in similar SOPS Database reports for hospitals and nursing homes. For additional details about data limitations, refer to Part I of the report.

Comparing Your Results

You can compare your ASC's percent positive scores on the SOPS ASC composite measures and items with the averages shown in Appendix A for ASCs that are similar to yours in terms of number of operating/procedure rooms or geographic region.

To compare your ASC's results with the averages in Appendix B, your ASC will have to compute percent positive scores on the SOPS ASC composite measures and items broken down by staff position and hours worked per week.

Highlights From Appendix A: Overall Results by Facility Characteristics

Number of Operating/Procedure Rooms (Tables A-1, A-4, A-5)

- There were small differences on the Composite Measure Average by number of operating procedure/rooms. However, ASCs with *1 to 2 operating/procedure rooms* had the highest average percent positive response for the *Staffing, Work Pressure, and Pace* composite measure (77 percent). ASCs with *6 or more operating/procedure rooms* had the lowest (71 percent).
- ASCs with *1 to 2 operating/procedure rooms* had the highest average percentage of respondents who gave their ASC an Overall Rating on Patient Safety of "Excellent" or "Very Good" (91 percent); ASCs with *6 or more operating/procedure rooms* had the lowest (85 percent).
- ASCs with *1 to 2 operating/procedure rooms* had the highest average percent positive for the item "Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns" (81 percent); ASCs with *6 or more operating/procedure rooms* had the lowest (73 percent).
- ASCs with *1 to 2 operating/procedure rooms* had the highest average percent positive response for the item "Immediately after procedures, team members discussed any concerns for patient recovery" (88 percent); ASCs with *6 or more operating/procedure rooms* had the lowest (75 percent).

Geographic Region (Tables A-6, A-8)

- There were small differences on the Composite Measure Average by geographic region. However, ASCs in the *Northeast* had the highest average percent positive response for the *Staffing, Work Pressure, and Pace* composite measure (77 percent). ASCs in the *Midwest* had the lowest (70 percent).
- ASCs from the *Northeast* had the highest average percentage of respondents who indicated that near-miss incidents were "Always" or "Most of the time" documented in an incident or occurrence report (94 percent); ASCs from the *Midwest* had the lowest (86 percent).

Highlights From Appendix B: Overall Results by Respondent Characteristics

Staff Position (Tables B-1, B-3, B-4, B-5)

- *Doctor/Physician (excl. Anesthesiologists) or Surgeons* had the highest percent positive Composite Measure Average (96 percent); *Other Clinical Staff or Clinical Support Staff* had the lowest (80 percent).
- *Doctor/Physician (excl. Anesthesiologists) or Surgeons* had the highest average percentage of respondents who indicated that near-miss incidents were "Always" or "Most of the time" documented in an incident or occurrence report (98 percent); *Certified Registered Nurse Anesthetists (CRNAs)* had the lowest (83 percent).
- *Doctor/Physician (excl. Anesthesiologists) or Surgeons* had the highest average percentage of respondents who gave their ASC an Overall Rating on Patient Safety of "Excellent" or "Very Good" (98 percent); *Other Clinical Staff or Clinical Support Staff* had the lowest (82 percent).
- *Doctor/Physician (excl. Anesthesiologists) or Surgeons* had the highest average percent positive response for the item "Immediately after procedures, team members discussed any concerns for patient recovery" (92 percent); *Certified Registered Nurse Anesthetists* had the lowest (66 percent).

Hours Worked Per Week (Tables B-6, B-8, B-9, B-10)

- Respondents who typically work *1 to 16 hours per week* had the highest percent positive Composite Measure Average (93 percent); respondents who typically work *32 to 40 hours per week* had the lowest (83 percent).
- Respondents who typically work *1 to 16 hours per week* had the highest average percentage of respondents who indicated that near-miss incidents were "Always" or "Most of the time" documented in an incident or occurrence report (95 percent); respondents who typically work *17 to 31 hours per week* had the lowest (89 percent).
- Respondents who typically work *1 to 16 hours per week* had the highest percentage of respondents who gave their ASC an Overall Rating on Patient Safety of "Excellent" or "Very Good" (94 percent); respondents who typically work *32 to 40 hours per week* had the lowest (84 percent).
- Respondents who typically work *1 to 16 hours per week* had the highest average percent positive response for the item "Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns" (85 percent); respondents who typically work *17 to 31 hours per week* and those who typically work *32 to 40 hours per week* had the lowest (68 percent).

Part II

Appendix A: Results by Facility Characteristics

(1) Number of Operating/Procedure Rooms

Note: Each table shows the number of ASCs and respondents by number of operating/procedure rooms. However, the precise number of ASCs and respondents corresponding to each cell in a table will vary because of individual nonresponse/missing data.



Table A-1. Composite Measure Average Percent Positive Response by Number of Operating/Procedure Rooms – 2021 SOPS ASC Database

		Number of Operating/Procedure Rooms					
SOF	PS Composite Measures	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms		
	# ASCs	33	47	83	72		
	# Respondents	694	1,226	3,232	3,766		
1.	Organizational Learning – Continuous Improvement	94%	94%	91%	91%		
2.	Management Support for Patient Safety	92%	92%	91%	89%		
3.	Communication About Patient Information	91%	91%	89%	89%		
4.	Communication Openness	92%	91%	89%	88%		
5.	Teamwork	90%	89%	88%	86%		
6.	Response to Mistakes	88%	87%	85%	83%		
7.	Staff Training	84%	83%	82%	80%		
8.	Staffing, Work Pressure, and Pace	77%	75%	75%	71%		
	Composite Measure Average	89%	88%	86%	85%		



Table A-2. Item Average Percent Positive Response by Number of Operating/Procedure Rooms – 2021 SOPS ASC Database (Page 1 of 3)

	Number of Operating/Procedure Rooms			
Survey Items By SOPS Composite Measure	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms
# ASCs	33	47	83	72
# Respondents	694	1,226	3,232	3,766
1. Organizational Learning – Continuous Improvement		% Agree/	Strongly Agree	
This facility actively looks for ways to improve patient safety. (Item C1)	94%	94%	93%	93%
We make improvements when someone points out patient safety problems. (Item C3)	94%	94%	92%	91%
We are good at changing processes to make sure the same patient safety problems don't happen again. (Item C6)	94%	92%	90%	90%
2. Management Support for Patient Safety		% Agree/	Strongly Agree	
Managers encourage everyone to suggest ways to improve patient safety. (Item E1)	92%	93%	91%	89%
Management examines near-miss events that could have harmed patients but did not. (Item E2)	91%	91%	92%	90%
Management provides adequate resources to improve patient safety. (Item E3)	94%	92%	90%	88%
3. Communication About Patient Information		% Most of t	he Time/Always	
Important patient care information is clearly communicated across areas in this facility. (Item A1)	96%	96%	94%	94%
We share key information about patients as soon as it becomes available. (Item A7)	97%	95%	94%	93%
Within this facility, we do a good job communicating information that affects patient care. (Item A9)	96%	96%	93%	92%
	% Rarely/Never			
Key information about patients is missing when it is needed. (Item A5 *)	76%	78%	74%	76%



Table A-2. Item Average Percent Positive Response by Number of Operating/Procedure Rooms – 2021 SOPS ASC Database (Page 2 of 3)

	٩	Number of Opera	ting/Procedure Roo	ms
Survey Items By SOPS Composite Measure	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms
# ASCs	33	47	83	72
# Respondents	694	1,226	3,232	3,766
4. Communication Openness		% Most of t	he Time/Always	
We feel comfortable asking questions when something doesn't seem right. (Item A2)	96%	95%	93%	93%
When we see someone with more authority doing something unsafe for patients, we speak up. (Item A4)	93%	93%	92%	91%
Our ideas and suggestions are valued in this facility. (Item A6)	88%	84%	82%	78%
5. Teamwork		% Agree/	Strongly Agree	
When someone in this facility gets really busy, others help out. (Item B1)	92%	92%	92%	89%
Doctors and staff clearly understand each other's roles and responsibilities. (Item B4)	90%	88%	90%	88%
We work together as an effective team. (Item B8)	94%	95%	93%	91%
		% Disagree/	Strongly Disagree	
Our facility allows disrespectful behavior by those working here. (Item B6*)	84%	82%	78%	76%
6. Response to Mistakes		% Agree/	Strongly Agree	
Staff are treated fairly when they make mistakes. (Item C2)	87%	88%	85%	83%
Learning, rather than blame, is emphasized when mistakes are made. (Item C4)	88%	85%	84%	82%
Staff are told about patient safety problems that happen in this facility. (Item C5)	91%	89%	87%	85%



Table A-2. Item Average Percent Positive Response by Number of Operating/Procedure Rooms – 2021 SOPS ASC Database (Page 3 of 3)

	Number of Operating/Procedure Rooms			
Survey Items by SOPS Composite Measure	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms
# ASCs	33	47	83	72
# Respondents	694	1,226	3,232	3,766
7. Staff Training		% Agree/Str	ongly Agree	
Staff who are new to this facility receive adequate orientation. (Item B2)	84%	85%	84%	81%
We get the on-the-job training we need in this facility. (Item B5)	89%	87%	86%	85%
Staff get the refresher training they need. (Item B7)	85%	84%	83%	81%
		% Disagree/Str	ongly Disagree	
Staff feel pressured to do tasks they haven't been trained to do. (Item B3*)	77%	76%	75%	71%
8. Staffing, Work Pressure, and Pace		% Most of the	e Time/Always	
We have enough staff to handle the workload. (Item A3)	83%	78%	81%	78%
There is enough time between procedures to properly prepare for the next one (Item A8)	88%	86%	87%	84%
	% Rarely/Never			
We feel rushed when taking care of patients. (Item A10*)	60%	62%	57%	53%



Table A-3. Item Average Percentages for Near-Miss Documentation by Number of Operating/Procedure Rooms – 2021 SOPS ASC Database

	Number of Operating/Procedure Rooms					
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (Item D1)	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms		
# ASCs	33	47	83	72		
# Respondents	694	1,226	3,232	3,766		
Always or Most of the Time	89%	91%	91%	90%		
Always	68%	72%	69%	67%		
Most of the time	21%	19%	23%	23%		
Sometimes	8%	6%	5%	6%		
Rarely	3%	2%	3%	3%		
Never	1%	0%	1%	1%		

Note: Percentages may not add to 100 due to rounding. In addition, "Always" and "Most of the time" may not add to the subtotal shown due to rounding.



Table A-4. Average Percentage of Respondents Giving Their Ambulatory Surgery Center an Overall Rating on Patient Safety by Number of Operating/Procedure Rooms – 2021 SOPS ASC Database

	Number of Operating/Procedure Rooms					
Overall Rating on Patient Safety (Item F1)	1 to 2 Rooms	3 Rooms	4 to 5 Rooms	6 or More Rooms		
# ASCs	33	47	83	72		
# Respondents	694	1,226	3,232	3,766		
Excellent or Very Good	91%	89%	87%	85%		
Excellent	57%	59%	57%	54%		
Very Good	34%	30%	30%	32%		
Good	7%	8%	10%	11%		
Fair	1%	2%	3%	3%		
Poor	0%	0%	0%	1%		

Note: Percentages may not add to 100 due to rounding. In addition, "Excellent" and "Very good" may not add to the subtotal shown due to rounding.



Table A-5. Item Average Percent Positive Response for Communication in the Surgery/Procedure Room by Number of Operating/Procedure Rooms – 2021 SOPS ASC Database

	Number of Operating/Procedure Rooms			
Communication in the Surgery/Procedure Room	1 to 2 Rooms 3 Rooms 4 to 5 Rooms 6			6 or More Rooms
# ASCs	33	47	83	72
# Respondents	694	1,226	3,232	3,766
In the past 6 months, how often were the following actions done in your facility?	% Most of the Time/Always			
Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (Item G1)	98%	95%	95%	96%
Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns. (Item G2)	81%	76%	74%	73%
Immediately after procedures, team members discussed any concerns for patient recovery. (Item G3)	88%	81%	81%	75%

Note: The item's survey location is shown after the item text. Results only include those respondents who answered "Yes" to being typically in the surgery/procedure room during surgeries, procedures, or treatments.



Appendix A: Overall Results by Facility Characteristics

(2) Geographic Region

Note 1: Each table shows the number of ASCs and respondents by geographic region. However, the precise number of ASCs and respondents corresponding to each cell in a table will vary because of individual nonresponse/missing data.

Note 2: States are categorized into geographic regions as follows:

- Northeast: CT, MA, ME, NH, NJ, NY, PA, RI, VT
- Midwest: IA, IL, IN, KS, MI, MN, MO, ND, NE, OH, SD, WI
- South: AL, AR, DC, DE, FL, GA, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, WV
- West: AK, AZ, CA, CO, HI, ID, MT, NM, NV, OR, UT, WA, WY



Table A-6. Composite Measure Average Percent Positive Response by Geographic Region – 2021 SOPS ASC Database

			Geograph	ic Region	
SO	PS Composite Measures	Northeast	Midwest	South	West
	# ASCs	29	47	92	67
	# Respondents	1,150	1,582	3,534	2,652
1.	Organizational Learning – Continuous Improvement	92%	90%	93%	92%
2.	Management Support for Patient Safety	88%	89%	92%	91%
3.	Communication About Patient Information	89%	90%	90%	90%
4.	Communication Openness	89%	88%	90%	90%
5.	Teamwork	87%	86%	89%	88%
6.	Response to Mistakes	85%	83%	87%	86%
7.	Staff Training	82%	80%	83%	81%
8.	Staffing, Work Pressure, and Pace	77%	70%	75%	75%
	Composite Measure Average	86%	85%	87%	87%



	Geographic Region				
Survey Items by SOPS Composite Measure	Northeast	Midwest	South	West	
# ASCs	29	47	92	67	
# Respondents	1,150	1,582	3,534	2,652	
1. Organizational Learning – Continuous Improvement	% Agree/Strongly Agree				
This facility actively looks for ways to improve patient safety. (Item C1)	92%	92%	94%	93%	
We make improvements when someone points out patient safety problems. (Item C3)	91%	91%	93%	93%	
We are good at changing processes to make sure the same patient safety problems don't happen again. (Item C6)	92%	89%	92%	90%	
2. Management Support for Patient Safety		% Agree/Stro	ongly Agree		
Managers encourage everyone to suggest ways to improve patient safety. (Item E1)	87%	90%	92%	91%	
Management examines near-miss events that could have harmed patients but did not. (Item E2)	89%	89%	93%	90%	
Management provides adequate resources to improve patient safety. (Item E3)	88%	87%	92%	91%	
3. Communication About Patient Information		% Most of the	Time/Always		
Important patient care information is clearly communicated across areas in this facility. (Item A1)	94%	94%	95%	95%	
We share key information about patients as soon as it becomes available. (Item A7)	94%	94%	95%	94%	
Within this facility, we do a good job communicating information that affects patient care. (Item A9)	93%	93%	94%	95%	
	% Rarely/Never				
Key information about patients is missing when it is needed. (Item A5R*)	74%	78%	75%	75%	

Table A-7. Item Average Percent Positive Response by Geographic Region – 2021 SOPS ASC Database (Page 1 of 3)



		Geograph	ic Region	
Survey Items by SOPS Composite Measure	Northeast	Midwest	South	West
# ASCs	29	47	92	67
# Respondents	1,150	1,582	3,534	2,652
4. Communication Openness		% Most of the	Time/Always	
We feel comfortable asking questions when something doesn't seem right. (Item A2)	93%	92%	95%	95%
When we see someone with more authority doing something unsafe for patients, we speak up. (Item A4)	92%	91%	93%	91%
Our ideas and suggestions are valued in this facility. (Item A6)	80%	79%	83%	83%
5. Teamwork		% Agree/Stro	ongly Agree	
When someone in this facility gets really busy, others help out. (Item B1)	90%	91%	91%	91%
Doctors and staff clearly understand each other's roles and responsibilities. (Item B4)	86%	86%	90%	90%
We work together as an effective team. (Item B8)	93%	92%	93%	94%
		% Disagree/Stro	ongly Disagree	
Our facility allows disrespectful behavior by those working here. (Item B6*)	80%	75%	81%	80%
6. Response to Mistakes		% Agree/Stro	ongly Agree	
Staff are treated fairly when they make mistakes. (Item C2)	84%	84%	86%	85%
Learning, rather than blame, is emphasized when mistakes are made. (Item C4)	82%	82%	85%	85%
Staff are told about patient safety problems that happen in this facility. (Item C5)	88%	84%	89%	87%

Table A-7. Item Average Percent Positive Response by Geographic Region – 2021 SOPS ASC Database (Page 2 of 3)

		Geograph	ic Region	
Survey Items by SOPS Composite Measure	Northeast	Midwest	South	West
# ASCs	29	47	92	67
# Respondents	1,150	1,582	3,534	2,652
7. Staff Training		% Agree/Stro	ongly Agree	
Staff who are new to this facility receive adequate orientation. (Item B2)	83%	82%	84%	83%
We get the on-the-job training we need in this facility. (Item B5)	85%	86%	88%	86%
Staff get the refresher training they need. (Item B7)	81%	82%	85%	82%
		% Disagree/Stro	ongly Disagree	
Staff feel pressured to do tasks they haven't been trained to do. (Item B3*)	78%	71%	74%	75%
8. Staffing, Work Pressure, and Pace		% Most of the	Time/Always	
We have enough staff to handle the workload. (Item A3)	81%	76%	81%	81%
There is enough time between procedures to properly prepare for the next one. (Item A8)	86%	82%	86%	87%
		% Rarely	/Never	
We feel rushed when taking care of patients. (Item A10*)	64%	52%	58%	56%

Table A-7. Item Average Percent Positive Response by Geographic Region – 2021 SOPS ASC Database (Page 3 of 3)



		Geograph	ic Region	
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (Item D1)	Northeast	Midwest	South	West
# ASCs	29	47	92	67
# Respondents	1,150	1,582	3,534	2,652
Always or Most of the time	94%	86%	93%	90%
Always	75%	62%	73%	66%
Most of the time	19%	24%	20%	24%
Sometimes	4%	9%	5%	7%
Rarely	2%	5%	2%	2%
Never	0%	0%	1%	1%

Table A-8. Item Average Percentages for Near-Miss Documentation by Geographic Region – 2021 SOPS ASC Database

Note: Percentages may not add to 100 due to rounding. In addition, "Always" and "Most of the time" may not add to the subtotal shown due to rounding.



Table A-9. Average Percentage of Respondents Giving Their Ambulatory Surgery Center an Overall Rating on Patient Safety byGeographic Region – 2021 SOPS ASC Database

		Geograp	hic Region	
Overall Rating on Patient Safety (Item F1)	Northeast	Midwest	South	West
# ASCs	29	47	92	67
# Respondents	1,150	1,582	3,534	2,652
Excellent or Very Good	87%	86%	88%	88%
Excellent	62%	53%	58%	54%
Very Good	25%	33%	30%	34%
Good	10%	11%	9%	9%
Fair	3%	3%	2%	3%
Poor	0%	1%	0%	1%

Note: Percentages may not add to 100 due to rounding. In addition, "Excellent" and "Very good" may not add to the subtotal shown due to rounding.



Table A-10. Item Average Percent Positive Response for Communication in the Surgery/Procedure Room by Geographic Region – 2021 SOPS ASC Database

		Geograph	ic Region	
Communication in the Surgery/Procedure Room	Northeast	Midwest	South	West
# ASCs	29	47	92	67
# Respondents	1,150	1,582	3,534	2,652
In the past 6 months, how often were the following actions done in your facility?		% Most of the	Time/Always	
Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (Item G1)	95%	94%	96%	95%
Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns. (Item G2)	77%	73%	76%	74%
Immediately after procedures, team members discussed any concerns for patient recovery. (Item G3)	83%	78%	82%	78%

Note: The item's survey location is shown after the item text. Results only include those respondents who answered "Yes" to being typically in the surgery/procedure room during surgeries, procedures, or treatments.



Appendix B: Overall Results by Respondent Characteristics

(1) Staff Position

Note 1: These breakout tables exclude ASCs that did not ask respondents to indicate their staff position. In addition, respondents who selected "Other" or who did not answer (missing) were not included.

Note 2: Each table shows the number of ASCs and respondents by staff position. The number of ASCs is based on whether ASCs asked respondents to indicate their staff position (not all ASCs asked this question). However, the precise number of ASCs and respondents corresponding to each cell in the tables will vary because of individual nonresponse/missing data.



Table B-1. Composite Measure Average Percent Positive Response by Staff Position - 2021 SOPS ASC Database

					Staff F	Position				
SOP	PS Composite Measures	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
	# ASCs	153	193	86	53	222	233	220	128	222
	# Respondents	614	1,821	278	103	658	2,840	988	270	870
1.	Organizational Learning – Continuous Improvement	91%	98%	91%	98%	97%	90%	92%	89%	92%
2.	Management Support for Patient Safety	90%	98%	87%	93%	98%	89%	89%	84%	89%
3.	Communication About Patient Information	91%	95%	88%	95%	95%	87%	89%	88%	88%
4.	Communication Openness	94%	98%	89%	99%	96%	87%	87%	83%	86%
5.	Teamwork	95%	97%	90%	94%	92%	86%	83%	80%	83%
6.	Response to Mistakes	88%	97%	80%	93%	95%	84%	81%	78%	79%
7.	Staff Training	87%	92%	80%	87%	91%	80%	75%	72%	76%
8.	Staffing, Work Pressure, and Pace	86%	96%	72%	90%	84%	64%	67%	67%	72%
	Composite Measure Average	90%	96%	85%	93%	94%	83%	83%	80%	83%



Table B-2. Item Average Percent Positive Response by Staff Position – 2021 SOPS ASC Database (Page 1 of 4)

				Staff Posit	tion				
Survey Items by SOPS Composite Measure	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
# ASCs	153	193	86	53	222	233	220	128	222
# Respondents	614	1,821	278	103	658	2,840	988	270	870
1. Organizational Learning – Continuous Improvement			9	ራ Agree/Stron	gly Agree				
This facility actively looks for ways to improve patient safety. (Item C1)	92%	98%	94%	97%	97%	92%	94%	92%	93%
We make improvements when someone points out patient safety problems. (Item C3)	92%	98%	93%	99%	97%	91%	91%	88%	91%
We are good at changing processes to make sure the same patient safety problems don't happen again. (Item C6)	89%	97%	88%	97%	98%	88%	91%	85%	91%
2. Management Support for Patient Safety			9	ራ Agree/Stron	gly Agree				
Managers encourage everyone to suggest ways to improve patient safety. (Item E1)	89%	98%	85%	91%	98%	90%	89%	82%	88%
Management examines near-miss events that could have harmed patients but did not. (Item E2)	92%	98%	87%	92%	99%	90%	87%	82%	90%
Management provides adequate resources to improve patient safety. (Item E3)	89%	98%	86%	97%	97%	86%	91%	85%	91%

Note: The item's survey location is shown after the item text.



Table B-2. Item Average Percent Positive Response by Staff Position – 2021 SOPS ASC Database (Page 2 of 4)

				Staff Posit	tion				
Survey Items by SOPS Composite Measure	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
# ASCs	153	193	86	53	222	233	220	128	222
# Respondents	614	1,821	278	103	658	2,840	988	270	870
3. Communication About Patient Information			%	Most of the Tir	me/Always				
Important patient care information is clearly communicated across areas in this facility. (Item A1)	97%	99%	96%	98%	98%	92%	95%	92%	94%
We share key information about patients as soon as it becomes available. (Item A7)	96%	99%	92%	98%	99%	94%	90%	93%	92%
Within this facility, we do a good job communicating information that affects patient care. (Item A9)	97%	99%	95%	99%	97%	92%	91%	90%	92%
				% Rarely/N	lever				
Key information about patients is missing when it is needed. (Item A5*)	74%	82%	71%	84%	84%	70%	79%	74%	74%
4. Communication Openness			%	Most of the Tir	me/Always				
We feel comfortable asking questions when something doesn't seem right. (Item A2)	97%	100%	97%	100%	97%	93%	94%	91%	91%
When we see someone with more authority doing something unsafe for patients, we speak up. (Item A4)	95%	98%	90%	100%	97%	90%	91%	86%	89%
Our ideas and suggestions are valued in this facility. (Item A6)	89%	96%	81%	96%	94%	77%	77%	72%	77%



Table B-2. Item Average Percent Positive Response by Staff Position – 2021 SOPS ASC Database (Page 3 of 4)

				Staff Posit	tion				
Survey Items by SOPS Composite Measure	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
# ASCs	153	193	86	53	222	233	220	128	222
# Respondents	614	1,821	278	103	658	2,840	988	270	870
5. Teamwork			9	% Agree/Stron	gly Agree				
When someone in this facility gets really busy, others help out. (Item B1)	95%	98%	91%	95%	95%	92%	85%	77%	85%
Doctors and staff clearly understand each other's roles and responsibilities. (Item B4)	96%	98%	93%	95%	91%	86%	87%	81%	82%
We work together as an effective team. (Item B8)	98%	99%	96%	99%	98%	93%	89%	87%	87%
			% D	isagree/Strong	gly Disagree	5			
Our facility allows disrespectful behavior by those working here. (Item B6*)	90%	94%	80%	90%	85%	73%	73%	76%	77%
6. Response to Mistakes			9	% Agree/Strong	gly Agree				
Staff are treated fairly when they make mistakes. (Item C2)	90%	98%	80%	94%	95%	84%	77%	76%	77%
Learning, rather than blame, is emphasized when mistakes are made. (Item C4)	87%	97%	74%	94%	94%	83%	78%	76%	76%
Staff are told about patient safety problems that happen in this facility. (Item C5)	88%	96%	86%	91%	96%	86%	87%	83%	84%



Table B-2. Item Average Percent Positive Response by Staff Position – 2021 SOPS ASC Database (Page 4 of 4)

				Staff Posit	tion				
Survey Items by SOPS Composite Measure	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
# ASCs	153	193	86	53	222	233	220	128	222
# Respondents	614	1,821	278	103	658	2,840	988	270	870
7. Staff Training			9	% Agree/Stron	gly Agree				
Staff who are new to this facility receive adequate orientation. (Item B2)	91%	94%	82%	89%	93%	80%	76%	72%	80%
We get the on-the-job training we need in this facility. (Item B5)	89%	94%	84%	94%	93%	86%	82%	76%	83%
Staff get the refresher training they need. (Item B7)	87%	93%	81%	90%	92%	81%	79%	77%	78%
			% D	isagree/Strong	gly Disagree	5			
Staff feel pressured to do tasks they haven't been trained to do. (Item B3*)	82%	88%	72%	76%	87%	74%	64%	63%	63%
8. Staffing, Work Pressure, and Pace			%	Most of the Tir	me/Always				
We have enough staff to handle the workload. (Item A3)	95%	97%	81%	93%	88%	75%	69%	68%	72%
There is enough time between procedures to properly prepare for the next one. (Item A8)	95%	98%	90%	99%	95%	79%	77%	80%	89%
				% Rarely/N	ever				
We feel rushed when taking care of patients. (Item A10*)	67%	92%	47%	80%	69%	38%	54%	55%	57%



Table B-3. Item Average Percentages for Near-Miss Documentation by Staff Position – 2021 SOPS ASC Database

				Staff P	osition				
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (Item D1)	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
# ASCs	153	193	86	53	222	233	220	128	222
# Respondents	614	1,821	278	103	658	2,840	988	270	870
Always or Most of the time	94%	98%	83%	91%	94%	88%	91%	90%	96%
Always	71%	80%	56%	74%	72%	61%	74%	75%	84%
Most of the time	22%	18%	27%	18%	22%	27%	17%	16%	12%
Sometimes	5%	2%	14%	9%	5%	8%	5%	5%	2%
Rarely	1%	0%	3%	0%	1%	4%	2%	5%	1%
Never	0%	0%	0%	0%	0%	0%	2%	0%	0%

Note: Percentages may not add to 100 due to rounding. In addition, "Always" and "Most of the time" may not add to the subtotal shown due to rounding.



Table B-4. Average Percentage of Respondents Giving Their Ambulatory Surgery Center an Overall Rating on Patient Safety by Staff Position – 2021 SOPS ASC Database

				Staff P	osition				
Overall Rating on Patient Safety (Item F1)	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
# ASCs	153	193	86	53	222	233	220	128	222
# Respondents	614	1,821	278	103	658	2,840	988	270	870
Excellent or Very Good	90%	98%	83%	94%	94%	85%	85%	82%	84%
Excellent	63%	78%	49%	54%	74%	46%	51%	48%	52%
Very Good	26%	20%	34%	40%	20%	39%	33%	34%	32%
Good	7%	2%	15%	6%	6%	11%	12%	13%	13%
Fair	2%	0%	2%	0%	0%	4%	3%	4%	3%
Poor	1%	0%	0%	0%	0%	0%	1%	2%	0%

Note: Percentages may not add to 100 due to rounding. In addition, "Excellent" and "Very good" may not add to the subtotal shown due to rounding.



Table B-5. Item Average Percent Positive Response for Communication in the Surgery/Procedure Room by Staff Position – 2021 SOPS ASC Database

		Staff Position							
Communication in the Surgery/Procedure Room	Anesthesi- ologist	Doctor/ Physician (excl. Anesthes- iologists) or Surgeon	Certified Registered Nurse Anesthetist (CRNA)	Physician Assistant or Nurse Practitioner	Manage- ment	Nurse	Tech- nician	Other Clinical Staff or Clinical Support Staff	Admin, Clerical, or Business Staff
# ASCs	153	193	86	53	222	233	220	128	222
# Respondents	614	1,821	278	103	658	2,840	988	270	870
In the past 6 months, how often were the following actions done in your facility?				% Most of the	e Time/Alwa	ays			
Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (Item G1)	96%	100%	92%	100%	98%	93%	92%	95%	93%
Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns. (Item G2)	75%	88%	69%	79%	79%	65%	71%	70%	73%
Immediately after procedures, team members discussed any concerns for patient recovery. (Item G3)	78%	92%	66%	88%	85%	73%	75%	82%	93%

Note: The item's survey location is shown after the item text. Results only include those respondents who answered "Yes" to being typically in the surgery/procedure room during surgeries, procedures, or treatments.



Appendix B: Overall Results by Respondent Characteristics

(2) Hours Worked Per Week

Note 1: These breakout tables exclude ASCs that did not ask respondents to indicate how many hours they worked per week in the ASC. In addition, respondents who did not answer (missing) were not included.

Note 2: Each table shows the number of ASCs and respondents by hours worked per week in the ASC. The number of ASCs is based on whether ASCs asked respondents to indicate their hours worked per week (not all ASCs asked this question). However, the precise number of ASCs and respondents corresponding to each cell in the tables will vary because of individual nonresponse/missing data.



			Hours Work	ed Per Week	
so	PS Composite Measures	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More Than 40 Hours
	# ASCs	213	221	233	218
	# Respondents	2,832	1,134	3,682	915
1.	Organizational Learning – Continuous Improvement	95%	90%	91%	95%
2.	Management Support for Patient Safety	94%	89%	89%	95%
3.	Communication About Patient Information	93%	88%	88%	92%
4.	Communication Openness	95%	89%	86%	93%
5.	Teamwork	95%	88%	84%	89%
6.	Response to Mistakes	92%	84%	81%	91%
7.	Staff Training	89%	81%	78%	86%
8.	Staffing, Work Pressure, and Pace	88%	71%	67%	77%
	Composite Measure Average	93%	85%	83%	90%

 Table B-6. Composite Measure Average Percent Positive Response by Hours Worked Per Week - 2021 SOPS ASC Database



	Hours Worked Per Week				
Survey Items by SOPS Composite Measure	1 to 16 hours	17 to 31 hours	32 to 40 hours	More than 40 hours	
# ASCs	213	221	233	218	
# Respondents	2,832	1,134	3,682	915	
1. Organizational Learning – Continuous Improvement		% Agree/Str	ongly Agree		
This facility actively looks for ways to improve patient safety. (Item C1)	96%	92%	92%	96%	
We make improvements when someone points out patient safety problems. (Item C3)	96%	92%	91%	95%	
We are good at changing processes to make sure the same patient safety problems don't happen again. (Item C6)	94%	88%	89%	95%	
2. Management Support for Patient Safety	% Agree/Strongly Agree				
Managers encourage everyone to suggest ways to improve patient safety. (Item E1)	94%	90%	89%	95%	
Management examines near-miss events that could have harmed patients but did not. (Item E2)	94%	90%	89%	96%	
Management provides adequate resources to improve patient safety. (Item E3)	94%	87%	88%	94%	
3. Communication About Patient Information	% Most of the Time/Always				
Important patient care information is clearly communicated across areas in this facility. (Item A1)	98%	94%	93%	96%	
We share key information about patients as soon as it becomes available. (Item A7)	98%	93%	93%	96%	
Within this facility, we do a good job communicating information that affects patient care. (Item A9)	98%	92%	92%	96%	
	% Rarely/Never				
Key information about patients is missing when it is needed. (Item A5*)	79%	73%	73%	79%	

Table B-7. Item Average Percent Positive Response by Hours Worked Per Week – 2021 SOPS ASC Database (Page 1 of 3)



		Hours Work	ed Per Week		
Survey Items by SOPS Composite Measure	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More than 40 Hours	
# ASCs	213	221	233	218	
# Respondents	2,832	1,134	3,682	915	
4. Communication Openness		% Most of th	e Time/Always		
We feel comfortable asking questions when something doesn't seem right. (Item A2)	98%	95%	92%	96%	
When we see someone with more authority doing something unsafe for patients, we speak up. (Item A4)	95%	93%	90%	94%	
Our ideas and suggestions are valued in this facility. (Item A6)	91%	80%	77%	88%	
5. Teamwork	% Agree/Strongly Agree				
When someone in this facility gets really busy, others help out. (Item B1)	96%	92%	88%	93%	
Doctors and staff clearly understand each other's roles and responsibilities. (Item B4)	96%	89%	84%	89%	
We work together as an effective team. (Item B8)	97%	94%	90%	95%	
	% Disagree/Strongly Disagree				
Our facility allows disrespectful behavior by those working here. (Item B6*)	89%	79%	74%	80%	
6. Response to Mistakes	% Agree/Strongly Agree				
Staff are treated fairly when they make mistakes. (Item C2)	93%	84%	80%	89%	
Learning, rather than blame, is emphasized when mistakes are made. (Item C4)	92%	83%	79%	91%	
Staff are told about patient safety problems that happen in this facility. (Item C5)	92%	85%	84%	94%	

Table B-7. Item Average Percent Positive Response by Hours Worked Per Week – 2021 SOPS ASC Database (Page 2 of 3)



		Hours Work	ed Per Week			
Survey Items by SOPS Composite Measure	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More than 40 Hours		
# ASCs	213	221	233	218		
# Respondents	2,832	1,134	3,682	915		
7. Staff Training		% Agree/Str	ongly Agree			
Staff who are new to this facility receive adequate orientation. (Item B2)	92%	80%	79%	86%		
We get the on-the-job training we need in this facility. (Item B5)	92%	86%	84%	89%		
Staff get the refresher training they need. (Item B7)	89%	84%	79%	88%		
	% Disagree/Strongly Disagree					
Staff feel pressured to do tasks they haven't been trained to do. (Item B3*)	84%	74%	69%	81%		
8. Staffing, Work Pressure, and Pace		% Most of the	e Time/Always			
We have enough staff to handle the workload. (Item A3)	93%	80%	73%	81%		
There is enough time between procedures to properly prepare for the next one. (Item A8)	96%	83%	80%	89%		
	% Rarely/Never					
We feel rushed when taking care of patients. (Item A10*)	76%	49%	47%	61%		

Table B-7. Item Average Percent Positive Response by Hours Worked Per Week – 2021 SOPS ASC Database (Page 3 of 3)



		Hours Work	ed Per Week	
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (Item D1)	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More than 40 Hours
# ASCs	213	221	233	218
# Respondents	2,832	1,134	3,682	915
Always or Most of the time	95%	89%	90%	93%
Always	73%	65%	68%	72%
Most of the time	22%	25%	22%	21%
Sometimes	4%	6%	7%	5%
Rarely	1%	3%	3%	1%
Never	0%	1%	1%	1%

 Table B-8. Item Average Percentages for Near-Miss Documentation by Hours Worked Per Week – 2021 SOPS ASC Database

Note: Percentages may not add to 100 due to rounding. In addition, "Always" and "Most of the time" may not add to the subtotal shown due to rounding.



Table B-9. Average Percentage of Respondents Giving Their Ambulatory Surgery Center an Overall Rating on Patient Safety by Hours Worked Per Week – 2021 SOPS ASC Database

	Hours Worked Per Week				
Overall Rating on Patient Safety (Item F1)	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More than 40 Hours	
# ASCs	213	221	233	218	
# Respondents	2,832	1,134	3,682	915	
Excellent or Very Good	94%	87%	84%	90%	
Excellent	68%	52%	50%	65%	
Very Good	26%	35%	35%	25%	
Good	4%	10%	12%	9%	
Fair	1%	2%	3%	1%	
Poor	0%	0%	1%	0%	

Note: Percentages may not add to 100 due to rounding. In addition, "Excellent" and "Very good" may not add to the subtotal shown due to rounding.



Table B-10. Item Average Percent Positive Response for Communication in the Surgery/Procedure Room by Hours Worked Per Week – 2021 SOPS ASC Database

	Hours Worked Per Week				
Communication in the Surgery/Procedure Room	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More than 40 Hours	
# ASCs	213	221	233	218	
# Respondents	2,832	1,134	3,682	915	
In the past 6 months, how often were the following actions done in your facility?		% Most of th	e Time/Always		
Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (Item G1)	98%	93%	92%	95%	
Just before the start of procedures, the doctor encouraged all team members to speak up at any time if they had any concerns. (Item G2)	85%	68%	68%	73%	
Immediately after procedures, team members discussed any concerns for patient recovery. (Item G3)	88%	76%	73%	83%	

Note: The item's survey location is shown after the item text. Results only include those respondents who answered "Yes" to being typically in the surgery/procedure room during surgeries, procedures, or treatments.

