Surveys on Patient Safety Culture® (SOPS®) Ambulatory Surgery Center Survey:

2023 User Database Report

Part II: Appendix A - Results by Facility Characteristics

Appendix B - Results by Respondent Characteristics

Prepared for:

Agency for Healthcare Research and Quality
U.S. Department of Health and Human Services
5600 Fishers Lane
Rockville, MD 20857
www.ahrq.gov

Table of Contents

List of Tables

Table   **Page**

[This page intentionally left blank]

Executive Summary

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

Appendixes A and B present average percent positive scores for the survey composite measures and items across database ambulatory surgery centers (ASCs) broken out by the following ASC and respondent characteristics.

Appendix A: Results by Facility Characteristics

- Number of Operating/Procedure Rooms
- Geographic Region

Appendix B: Results by Respondent Characteristics

- Staff Position
- Hours Worked Per Week

Highlights from the results by facility and respondent characteristics are presented on the next few pages. Highlights were based on results for the eight patient safety culture composite measures, and for the Near-Miss Documentation, Overall Patient Safety Rating, and Communication in the Surgery/Procedure Room items. The bottom row of the composite measure tables presents the composite measures average as a summary statistic for comparing breakout categories.

Data Limitations

This report has the following limitation:

- The database for the 2023 report includes 243 ASCs, which represent less than 5 percent of the total number of ASCs in the United States. 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 with characteristics (number of operating/procedure rooms and geographic region) similar to your ASC.

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

Highlights From Appendix A: Results by Facility Characteristics

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

- ASCs with 1-3 operating/procedure rooms had a higher:

    o Composite Measure Average (88 percent) than ASCs with *7 or more operating/procedure rooms* (84 percent).
    o Average percentage of respondents who gave their ASC a Patient Safety Rating of "Excellent" or "Very good" (89 percent) than ASCs with 7 *or more operating/procedure rooms* (83 percent).

Geographic Region (Tables A-6, A-8, A-9)

- *West South Central* ASCs had the highest Composite Measure Average (88 percent); *East North Central* ASCs had the lowest (83 percent).
- *Mid-Atlantic* ASCs 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); *Mountain* ASCs had the lowest (81 percent).
- *New England* and *West South Central* ASCs had the highest average percentage of respondents who gave their ASC a patient safety rating of "Excellent" or "Very good" (88 percent); *Mountain* ASCs had the lowest (81 percent).

Highlights From Appendix B: Results by Respondent Characteristics

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

- *Doctors/Physicians (excl. Anesthesiologists) or Surgeons* had the highest Composite Measure Average (97 percent); *Other Clinical Staff or Clinical Support Staff* had the lowest (81 percent).
- *Physician Assistants/Nurse Practitioners* 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); *Nurses* had the lowest (87 percent).

- *Doctors/Physicians (excl. Anesthesiologists) or Surgeons* and *Physician Assistants/Nurse Practitioners* had the highest average percentage of respondents who gave their ASC a patient safety rating of "Excellent" or "Very good" (97 percent); *Other Clinical Staff or Clinical Support Staff* had the lowest (74 percent).

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

- Respondents who worked *1 to 16 hours per week* had the highest:

  - Composite Measure Average (93 percent); respondents who worked *32 to 40 hours per week* had the lowest (82 percent).
  - 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 worked *17 to 31 hours* and *32 to 40 hours per week* had the lowest (89 percent).
  - Average percentage of respondents who gave their ASC a Patient Safety Rating of "Excellent" or "Very good" (93 percent); respondents who worked *32 to 40 hours per week* had the lowest (82 percent).

Part II

Appendix A: Results by Facility Characteristics

(1) Number of Operating/Procedure Rooms

Note: The number of ASCs and respondents in each number of operating/procedure rooms category is shown in each table. However, the precise number of ASCs and respondents corresponding to each data cell in a table will vary because ASCs may have omitted a specific survey item and because of individual nonresponse/missing data.

Table A-1. Composite Measure Average Percent Positive Response by Number of Operating/Procedure Rooms – 2023 SOPS ASC Database

SOPS Composite Measures	Number of Operating/Procedure Rooms				
	1 to 3 Rooms	**4 Rooms**	**5 Rooms**	**6 Rooms**	**7 Rooms or More**
# ASCs	29	40	46	38	90
# Respondents	519	870	1,164	1,215	3,690
1. Organizational Learning – Continuous Improvement	94%	93%	91%	91%	90%
2. Communication About Patient Information	91%	90%	90%	90%	88%
3. Management Support for Patient Safety	90%	91%	89%	89%	88%
4. Communication Openness	91%	91%	88%	89%	88%
5. Teamwork	89%	88%	87%	87%	85%
6. Response to Mistakes	89%	87%	86%	86%	83%
7. Staff Training	84%	81%	79%	83%	78%
8. Staffing, Work Pressure, and Pace	77%	74%	73%	73%	68%
Composite Measure Average	88%	87%	85%	86%	84%

Table A-2. Item Average Percent Positive Response by Number of Operating/Procedure Rooms – 2023 SOPS ASC Database (Page 1 of 4)

Survey Items by SOPS Composite Measure	Number of Operating/Procedure Rooms				
	1 to 3 Rooms	**4 Rooms**	**5 Rooms**	**6 Rooms**	**7 Rooms or More**
# ASCs	29	40	46	38	90
# Respondents	519	870	1,164	1,215	3,690
1. Organizational Learning – Continuous Improvement	% Strongly Agree/Agree				
This facility actively looks for ways to improve patient safety. (Item C1)	94%	94%	91%	92%	91%
We make improvements when someone points out patient safety problems. (Item C3)	94%	93%	92%	91%	90%
We are good at changing processes to make sure the same patient safety problems don't happen again. (Item C6)	93%	91%	89%	89%	88%
2. Communication About Patient Information	% Always/Most of the time				
Important patient care information is clearly communicated across areas in this facility. (Item A1)	96%	95%	96%	95%	93%
We share key information about patients as soon as it becomes available. (Item A7)	94%	96%	95%	96%	94%
Within this facility, we do a good job communicating information that affects patient care. (Item A9)	94%	94%	95%	94%	92%
	% Never/Rarely				
Key information about patients is missing when it is needed. (Item A5*)	78%	76%	76%	76%	73%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Table A-2. Item Average Percent Positive Response by Number of Operating/Procedure Rooms – 2023 SOPS ASC Database (Page 2 of 4)

Survey Items by SOPS Composite Measure	Number of Operating/Procedure Rooms				
	1 to 3 Rooms	4 Rooms	5 Rooms	6 Rooms	7 Rooms or More
# ASCs	29	40	46	38	90
# Respondents	519	870	1,164	1,215	3,690
3. Management Support for Patient Safety	% Strongly Agree/Agree				
Managers encourage everyone to suggest ways to improve patient safety. (Item E1)	90%	91%	88%	89%	88%
Management examines near-miss events that could have harmed patients but did not. (Item E2)	89%	91%	90%	91%	90%
Management provides adequate resources to improve patient safety. (Item E3)	90%	91%	88%	89%	88%
4. Communication Openness	% Always/Most of the time				
We feel comfortable asking questions when something doesn't seem right. (Item A2)	96%	95%	92%	94%	93%
When we see someone with more authority doing something unsafe for patients, we speak up. (Item A4)	92%	91%	92%	93%	91%
Our ideas and suggestions are valued in this facility. (Item A6)	86%	86%	81%	81%	79%

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

Survey Items by SOPS Composite Measure	Number of Operating/Procedure Rooms				
	1 to 3 Rooms	**4 Rooms**	**5 Rooms**	**6 Rooms**	**7 Rooms or More**
# ASCs	29	40	46	38	90
# Respondents	519	870	1,164	1,215	3,690
5. Teamwork	% Strongly Agree/Agree				
When someone in this facility gets really busy, others help out. (Item B1)	92%	92%	90%	91%	89%
Doctors and staff clearly understand each other's roles and responsibilities. (Item B4)	87%	88%	86%	89%	85%
We work together as an effective team. (Item B8)	94%	93%	93%	92%	91%
	% Strongly Disagree/Disagree				
Our facility allows disrespectful behavior by those working here. (Item B6*)	82%	78%	78%	74%	74%
6. Response to Mistakes	% Strongly Agree/Agree				
Staff are treated fairly when they make mistakes. (Item C2)	88%	86%	85%	85%	82%
Learning, rather than blame, is emphasized when mistakes are made. (Item C4)	87%	84%	85%	84%	81%
Staff are told about patient safety problems that happen in this facility. (Item C5)	91%	90%	89%	88%	87%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Survey Items by SOPS Composite Measure	Number of Operating/Procedure Rooms				
	1 to 3 Rooms	**4 Rooms**	**5 Rooms**	**6 Rooms**	**7 Rooms or More**
# ASCs	29	40	46	38	90
# Respondents	519	870	1,164	1,215	3,690
7. Staff Training	% Strongly Agree/Agree				
Staff who are new to this facility receive adequate orientation. (Item B2)	83%	81%	82%	84%	80%
We get the on-the-job training we need in this facility. (Item B5)	90%	87%	85%	87%	83%
Staff get the refresher training they need. (Item B7)	87%	82%	83%	85%	82%
	% Strongly Disagree/Disagree				
Staff feel pressured to do tasks they haven't been trained to do. (Item B3*)	75%	74%	68%	74%	68%
8. Staffing, Work Pressure, and Pace	% Always/Most of the time				
We have enough staff to handle the workload. (Item A3)	85%	79%	79%	80%	75%
There is enough time between procedures to properly prepare for the next one. (Item A8)	85%	84%	83%	84%	80%
	% Never/Rarely				
We feel rushed when taking care of patients. (Item A10*)	61%	59%	56%	55%	50%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Table A-3. Average Percentage of Respondents for Near-Miss Documentation by Number of Operating/Procedure Rooms – 2023 SOPS ASC Database

Near-Miss Documentation	Number of Operating/Procedure Rooms				
	1 to 3 Rooms	4 Rooms	5 Rooms	6 Rooms	7 Rooms or More
# ASCs	29	40	46	38	90
# Respondents	519	870	1,164	1,215	3,690
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (Item D1)					
Always or Most of the time	90%	89%	93%	89%	89%
Always	65%	67%	68%	64%	63%
Most of the time	24%	23%	25%	25%	26%
Sometimes	4%	9%	5%	8%	7%
Rarely	4%	1%	1%	2%	2%
Never	2%	1%	0%	1%	1%

Note: The item's survey location is shown in parentheses after the item text. Percentages may not add to 100 due to rounding. "Always or Most of the time" may not equal the sum of the separate response option percentages due to rounding.

Table A-4. Average Percentage of Respondents for Overall Patient Safety Rating by Number of Operating/Procedure Rooms – 2023 SOPS ASC Database

Overall Patient Safety Rating	Number of Operating/Procedure Rooms				
	1 to 3 Rooms	4 Rooms	5 Rooms	6 Rooms	7 Rooms or More
# ASCs	29	40	46	38	90
# Respondents	519	870	1,164	1,215	3,690
Please give your facility an overall rating on patient safety. (Item F1)					
Excellent or Very good	89%	87%	86%	85%	83%
Excellent	56%	58%	57%	55%	49%
Very good	33%	29%	28%	30%	34%
Good	8%	11%	11%	11%	13%
Fair	2%	2%	3%	3%	4%
Poor	1%	0%	0%	0%	1%

Note: The item's survey location is shown in parentheses after the item text. Percentages may not add to 100 due to rounding. "Excellent or Very good" may not equal the sum of the separate response option percentages due to rounding.

Table A-5. Item Average Percent Positive Response for Communication in the Surgery/Procedure Room by Number of Operating/Procedure Rooms – 2023 SOPS ASC Database

Communication in the Surgery/Procedure Room	Number of Operating/Procedure Rooms				
	1 to 3 Rooms	**4 Rooms**	**5 Rooms**	**6 Rooms**	**7 Rooms or More**
# ASCs	29	40	46	38	90
# Respondents	519	870	1,164	1,215	3,690
In the past 6 months, how often were the following actions done in your facility?	% Always/Most of the time				
Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (Item G1)	97%	96%	93%	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)	78%	76%	75%	74%	71%
Immediately after procedures, team members discussed any concerns for patient recovery. (Item G3)	77%	81%	78%	77%	75%

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

Appendix A: Results by Facility Characteristics

(2) Geographic Region

Note 1: The number of ASCs and respondents in each geographic region category is shown in each table. However, the precise number of ASCs and respondents corresponding to each data cell in a table will vary because ASCs may have omitted a specific survey item and because of individual nonresponse/missing data.

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

- New England: CT, MA, ME, NH, RI, VT
- Mid-Atlantic: NJ, NY, PA
- South Atlantic/Associated Territories: DC, DE, FL, GA, MD, NC, SC, VA, WV, PR, VI
- East North Central: IL, IN, MI, OH, WI
- East South Central: AL, KY, MS, TN
- West North Central: IA, KS, MN, MO, ND, NE, SD
- West South Central: AR, LA, OK, TX
- Mountain: AZ, CO, ID, MT, NM, NV, UT, WY
- Pacific/Associated Territories: AK, AS, CA, GU, HI, MH, MP, OR, WA

Table A-6. Composite Measure Average Percent Positive Response by Geographic Region – 2023 SOPS ASC Database

SOPS Composite Measures	Geographic Region								
	New England	Mid-Atlantic	South Atlantic	East North Central	East South Central	West North Central	West South Central	Mountain	Pacific
# ASCs	12	19	56	27	10	21	36	22	40
# Respondents	456	485	1,805	686	449	687	1,001	440	1,449
1. Organizational Learning – Continuous Improvement	93%	92%	90%	91%	93%	92%	93%	89%	91%
2. Communication About Patient Information	89%	91%	89%	88%	91%	91%	91%	87%	89%
3. Management Support for Patient Safety	92%	90%	89%	87%	91%	91%	91%	86%	89%
4. Communication Openness	90%	89%	89%	87%	90%	91%	90%	88%	89%
5. Teamwork	89%	87%	86%	85%	87%	86%	88%	85%	86%
6. Response to Mistakes	89%	85%	85%	83%	86%	86%	87%	83%	85%
7. Staff Training	81%	81%	80%	79%	82%	83%	83%	78%	79%
8. Staffing, Work Pressure, and Pace	70%	74%	69%	67%	71%	77%	76%	73%	72%
Composite Measure Average	87%	86%	84%	83%	87%	87%	88%	84%	85%

Table A-7. Item Average Percent Positive Response by Geographic Region – 2023 SOPS ASC Database (Page 1 of 4)

Survey Items by SOPS Composite Measure	Geographic Region								
	New England	Mid-Atlantic	South Atlantic	East North Central	East South Central	West North Central	West South Central	Mountain	Pacific
# ASCs	12	19	56	27	10	21	36	22	40
# Respondents	456	485	1,805	686	449	687	1,001	440	1,449
1. Organizational Learning – Continuous Improvement	% Strongly Agree/Agree								
This facility actively looks for ways to improve patient safety. (Item C1)	95%	93%	91%	94%	94%	92%	93%	89%	92%
We make improvements when someone points out patient safety problems. (Item C3)	93%	93%	91%	91%	94%	92%	94%	89%	91%
We are good at changing processes to make sure the same patient safety problems don't happen again. (Item C6)	92%	91%	88%	87%	92%	91%	92%	88%	90%
2. Communication About Patient Information	% Always/Most of the time								
Important patient care information is clearly communicated across areas in this facility. (Item A1)	95%	96%	93%	95%	95%	94%	96%	92%	95%
We share key information about patients as soon as it becomes available. (Item A7)	94%	96%	95%	95%	94%	96%	96%	92%	94%
Within this facility, we do a good job communicating information that affects patient care. (Item A9)	94%	94%	92%	92%	95%	95%	96%	91%	94%
	% Never/Rarely								
Key information about patients is missing when it is needed. (Item A5*)	72%	75%	74%	72%	80%	81%	78%	75%	72%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Survey Items by SOPS Composite Measure	Geographic Region								
	New England	Mid-Atlantic	South Atlantic	East North Central	East South Central	West North Central	West South Central	Mountain	Pacific
# ASCs	12	19	56	27	10	21	36	22	40
# Respondents	456	485	1,805	686	449	687	1,001	440	1,449
2. Management Support for Patient Safety	% Strongly Agree/Agree								
Managers encourage everyone to suggest ways to improve patient safety. (Item E1)	91%	90%	88%	86%	89%	91%	91%	88%	89%
Management examines near-miss events that could have harmed patients but did not. (Item E2)	94%	90%	91%	89%	94%	91%	92%	85%	89%
Management provides adequate resources to improve patient safety. (Item E3)	92%	90%	87%	88%	91%	90%	91%	85%	89%
4. Communication Openness	% Always/Most of the time								
We feel comfortable asking questions when something doesn't seem right. (Item A2)	95%	94%	94%	94%	95%	94%	93%	92%	93%
When we see someone with more authority doing something unsafe for patients, we speak up. (Item A4)	92%	92%	92%	90%	92%	92%	93%	88%	91%
Our ideas and suggestions are valued in this facility. (Item A6)	82%	82%	80%	76%	81%	87%	84%	84%	81%

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

Table A-7. Item Average Percent Positive Response by Geographic Region – 2023 SOPS ASC Database (Page 3 of 4)

Survey Items by SOPS Composite Measure	Geographic Region								
	New England	Mid-Atlantic	South Atlantic	East North Central	East South Central	West North Central	West South Central	Mountain	Pacific
# ASCs	12	19	56	27	10	21	36	22	40
# Respondents	456	485	1,805	686	449	687	1,001	440	1,449
5. Teamwork	% Strongly Agree/Agree								
When someone in this facility gets really busy, others help out. (Item B1)	92%	89%	91%	91%	91%	91%	93%	88%	90%
Doctors and staff clearly understand each other's roles and responsibilities. (Item B4)	90%	86%	87%	83%	89%	89%	89%	86%	86%
We work together as an effective team. (Item B8)	94%	91%	92%	93%	94%	92%	94%	90%	93%
	% Strongly Disagree/Disagree								
Our facility allows disrespectful behavior by those working here. (Item B6*)	78%	83%	76%	73%	75%	74%	79%	75%	77%
6. Response to Mistakes	% Strongly Agree/Agree								
Staff are treated fairly when they make mistakes (Item C2)	88%	82%	84%	83%	83%	84%	86%	83%	85%
Learning, rather than blame, is emphasized when mistakes are made (Item C4)	89%	82%	84%	82%	85%	84%	85%	84%	83%
Staff are told about patient safety problems that happen in this facility. (Item C5)	89%	90%	88%	85%	91%	89%	91%	84%	88%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Survey Items by SOPS Composite Measure	Geographic Region								
	New England	**Mid-Atlantic**	**South Atlantic**	**East North Central**	**East South Central**	**West North Central**	**West South Central**	**Mountain**	**Pacific**
# ASCs	12	19	56	27	10	21	36	22	40
# Respondents	456	485	1,805	686	449	687	1,001	440	1,449
7. Staff Training	% Strongly Agree/Agree								
Staff who are new to this facility receive adequate orientation. (Item B2)	83%	83%	80%	77%	81%	83%	85%	80%	81%
We get the on-the-job training we need in this facility. (Item B5)	87%	87%	85%	85%	88%	87%	86%	83%	85%
Staff get the refresher training they need. (Item B7)	81%	82%	83%	82%	86%	85%	86%	79%	82%
	% Strongly Disagree/Disagree								
Staff feel pressured to do tasks they haven't been trained to do. (Item B3*)	73%	71%	70%	70%	72%	76%	74%	69%	68%
8. Staffing, Work Pressure, and Pace	% Always/Most of the time								
We have enough staff to handle the workload. (Item A3)	73%	78%	74%	77%	76%	85%	84%	77%	80%
There is enough time between procedures to properly prepare for the next one. (Item A8)	81%	82%	81%	79%	86%	86%	86%	85%	82%
	% Never/Rarely								
We feel rushed when taking care of patients. (Item A10*)	56%	61%	52%	44%	52%	60%	60%	56%	55%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Table A-8. Average Percentage of Respondents for Near-Miss Documentation by Geographic Region – 2023 SOPS ASC Database

Near-Miss Documentation	Geographic Region								
	New England	Mid-Atlantic	South Atlantic	East North Central	East South Central	West North Central	West South Central	Mountain	Pacific
# ASCs	12	19	56	27	10	21	36	22	40
# Respondents	456	485	1,805	686	449	687	1,001	440	1,449
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (Item D1)									
Always or Most of the time	92%	94%	92%	88%	90%	90%	92%	81%	90%
Always	66%	73%	66%	62%	71%	61%	66%	58%	65%
Most of the time	26%	21%	26%	26%	19%	29%	26%	23%	25%
Sometimes	6%	4%	6%	9%	7%	7%	6%	13%	6%
Rarely	1%	1%	2%	2%	2%	3%	1%	4%	3%
Never	1%	1%	1%	1%	1%	0%	0%	3%	1%

Note: The item's survey location is shown in parentheses after the item text. Percentages may not add to 100 due to rounding. "Always or Most of the time" may not equal the sum of the separate response option percentages due to rounding.

Table A-9. Average Percentage of Respondents for Overall Patient Safety Rating by Geographic Region – 2023 SOPS ASC Database

Overall Patient Safety Rating	Geographic Region								
	New England	Mid-Atlantic	South Atlantic	East North Central	East South Central	West North Central	West South Central	Mountain	Pacific
# ASCs	12	19	56	27	10	21	36	22	40
# Respondents	456	485	1,805	686	449	687	1,001	440	1,449
Please give your facility an overall rating on patient safety. (Item F1)									
Excellent or Very good	88%	87%	84%	84%	87%	87%	88%	81%	84%
Excellent	59%	59%	52%	48%	58%	54%	60%	48%	52%
Very good	29%	29%	31%	36%	29%	33%	27%	33%	32%
Good	10%	9%	12%	12%	12%	9%	9%	13%	13%
Fair	2%	3%	4%	3%	1%	3%	3%	4%	3%
Poor	0%	0%	1%	0%	0%	1%	0%	2%	0%

Note: The item's survey location is shown in parentheses after the item text. Percentages may not add to 100 due to rounding. "Excellent or Very good" may not equal the sum of the separate response option percentages due to rounding.

Table A-10. Item Average Percent Positive Response for Communication in the Surgery/Procedure Room by Geographic Region – 2023 SOPS ASC Database

Communication in the Surgery/Procedure Room	Geographic Region								
	New England	Mid-Atlantic	South Atlantic	East North Central	East South Central	West North Central	West South Central	Mountain	Pacific
# ASCs	12	19	56	27	10	21	36	22	40
# Respondents	456	485	1,805	686	449	687	1,001	440	1,449
In the past 6 months, how often were the following actions done in your facility?	% Always/Most of the time								
Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (Item G1)	97%	92%	95%	90%	94%	94%	95%	97%	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)	79%	75%	75%	70%	70%	81%	74%	70%	72%
Immediately after procedures, team members discussed any concerns for patient recovery. (Item G3)	80%	84%	75%	70%	78%	76%	80%	72%	78%

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

Appendix B: Results by Respondent Characteristics

(1) Staff Position

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

Note 2: The number of ASCs and respondents by staff position is shown in each table. The number of ASCs includes those ASCs that asked respondents to indicate their staff position. However, the precise number of ASCs and respondents corresponding to each data cell in the tables will vary because ASCs may have omitted a specific survey item and because of individual nonresponse/missing data.

Note 3: The survey staff positions are as follows:

- **Anesthesiologist**
- **Doctor/Physician (excluding Anesthesiologists) or Surgeon**
- **Certified Registered Nurse Anesthetist (CRNA)**
- **Physician Assistant or Nurse Practitioner**
- **Management:** Medical Director, Center Director, Clinical Director/Administrator, Nurse Manager, Business Manager, Materials Manager, Office Manager, Other Manager
- **Nurse:** Registered Nurse (RN), Licensed Practical Nurse (LPN)/Licensed Vocational Nurse (LVN)
- **Technician:** Surgical/Scrub Technician, Sterile Processing Technician, X-Ray Technician, Other Technician
- **Other Clinical Staff or Clinical Support Staff:** Anesthesiologist Assistant, Nurse Assistant, Medical Assistant, Other Clinical Staff or Clinical Support Staff
- **Administrative, Clerical, or Business Staff:** Billing, Front Desk, Receptionist, Insurance Processor, Medical Records, Scheduler, Other Administrative or Clerical Staff Position

Table B-1. Composite Measure Average Percent Positive Response by Staff Position – 2023 SOPS ASC Database

SOPS Composite Measures	Anesthesi-ologist	Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon	Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
1. Organizational Learning – Continuous Improvement	90%	98%	88%	99%	97%	88%	90%	88%	93%
2. Communication About Patient Information	92%	97%	94%	99%	93%	86%	89%	85%	88%
3. Management Support for Patient Safety	92%	97%	89%	97%	97%	87%	87%	84%	88%
4. Communication Openness	92%	98%	90%	99%	95%	86%	85%	82%	87%
5. Teamwork	91%	97%	89%	96%	93%	84%	82%	79%	80%
6. Response to Mistakes	88%	97%	82%	96%	95%	83%	81%	73%	80%
7. Staff Training	85%	94%	84%	91%	91%	78%	73%	74%	78%
8. Staffing, Work Pressure, and Pace	79%	95%	73%	92%	81%	61%	63%	65%	75%
Composite Measure Average	89%	97%	87%	95%	93%	82%	82%	81%	85%

Survey Items by SOPS Composite Measure	Staff Position								
	Anesthesi-ologist	Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon	Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
1. Organizational Learning – Continuous Improvement	% Strongly Agree/Agree								
This facility looks for ways to improve patient safety. (Item C1)	91%	99%	88%	98%	97%	90%	91%	89%	92%
We make improvements when someone points out patient safety problems. (Item C3)	91%	98%	89%	100%	98%	88%	90%	89%	92%
We are good at changing processes to make sure the same patient safety problems don't happen again. (Item C6)	88%	97%	86%	100%	96%	86%	90%	86%	93%

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

Survey Items by SOPS Composite Measure	Staff Position								
	Anesthesi-ologist	Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon	Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
2. Communication About Patient Information	% Always/Most of the time								
Important patient care information is clearly communicated across areas in this facility. (Item A1)	98%	99%	98%	100%	97%	92%	93%	93%	93%
We share key information about patients as soon as it becomes available. (Item A7)	96%	99%	98%	100%	98%	94%	92%	92%	93%
Within this facility, we do a good job communicating information that affects patient care. (Item A9)	95%	99%	96%	100%	97%	92%	92%	91%	93%
	% Never/Rarely								
Key information about patients is missing when it is needed. (Item A5*)	80%	89%	84%	95%	80%	67%	78%	65%	73%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Survey Items by SOPS Composite Measure	Staff Position								
	Anesthesi-ologist	Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon	Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
3. Management Support for Patient Safety	% Strongly Agree/Agree								
Managers encourage everyone to suggest ways to improve patient safety. (Item E1)	92%	97%	86%	95%	98%	86%	87%	82%	87%
Management examines near-miss events that could have harmed patients but did not. (Item E2)	91%	97%	94%	96%	96%	89%	86%	85%	88%
Management provides adequate resources to improve patient safety. (Item E3)	91%	97%	88%	99%	96%	85%	88%	84%	90%

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

	Staff Position								
Survey Items by SOPS Composite Measure	**Anesthesi-ologist**	**Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon**	**Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
4. Communication Openness	% Always/Most of the time								
We feel comfortable asking questions when something doesn't seem right. (Item A2)	96%	99%	98%	100%	96%	93%	91%	88%	91%
When we see someone with more authority doing something unsafe for patients, we speak up. (Item A4)	96%	98%	94%	99%	95%	89%	90%	86%	91%
Our ideas and suggestions are valued in this facility. (Item A6)	84%	96%	77%	97%	94%	77%	75%	73%	78%

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

Survey Items by SOPS Composite Measure	Staff Position								
	Anesthesi-ologist	Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon	Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
5. Teamwork	% Strongly Agree/Agree								
When someone in this facility gets really busy, others help out. (Item B1)	94%	98%	91%	95%	96%	91%	82%	83%	85%
Doctors and staff clearly understand each other's roles and responsibilities. (Item B4)	92%	97%	95%	97%	91%	84%	88%	81%	79%
We work together as an effective team. (Item B8)	95%	99%	97%	99%	96%	92%	88%	85%	85%
	% Strongly Disagree/Disagree								
Our facility allows disrespectful behavior by those working here. (Item B6*)	84%	94%	74%	95%	88%	70%	70%	67%	73%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Survey Items by SOPS Composite Measure	Staff Position								
	Anesthesi-ologist	Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon	Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
6. Response to Mistakes	% Strongly Agree/Agree								
Staff are treated fairly when they make mistakes. (Item C2)	89%	97%	82%	94%	94%	82%	79%	67%	80%
Learning, rather than blame, is emphasized when mistakes are made. (Item C4)	86%	98%	82%	97%	95%	80%	78%	71%	76%
Staff are told about patient safety problems that happen in this facility. (Item C5)	89%	97%	81%	99%	96%	86%	87%	82%	85%

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

Survey Items by SOPS Composite Measure	Staff Position								
	Anesthesi-ologist	Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon	Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
7. Staff Training	% Strongly Agree/Agree								
Staff who are new to this facility receive adequate orientation. (Item B2)	88%	94%	87%	86%	90%	78%	74%	79%	81%
We get the on-the-job training we need in this facility. (Item B5)	88%	96%	88%	96%	93%	85%	82%	79%	83%
Staff get the refresher training they need. (Item B7)	86%	93%	87%	97%	93%	81%	79%	74%	81%
	% Strongly Disagree/Disagree								
Staff feel pressured to do tasks they haven't been trained to do. (Item B3*)	78%	90%	74%	86%	85%	67%	59%	62%	67%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

	Staff Position								
SOPS Composite Measures	**Anesthesi-ologist**	**Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon**	**Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
8. Staffing, Work Pressure, and Pace	% Always/Most of the time								
We have enough staff to handle the workload. (Item A3)	90%	95%	83%	94%	88%	73%	65%	67%	75%
There is enough time between procedures to properly prepare for the next one. (Item A8)	90%	98%	87%	97%	93%	73%	74%	80%	84%
	% Never/Rarely								
We feel rushed when taking care of patients. (Item A10*)	58%	91%	50%	86%	63%	36%	50%	48%	64%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Table B-3. Average Percentage of Respondents for Near-Miss Documentation by Staff Position – 2023 SOPS ASC Database

Near-Miss Documentation	Staff Position								
	Anesthesi-ologist	Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon	Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (Item D1)									
Always or Most of the time	90%	96%	95%	98%	94%	87%	91%	93%	94%
Always	54%	77%	74%	83%	68%	55%	71%	76%	83%
Most of the time	36%	19%	21%	15%	26%	31%	20%	17%	12%
Sometimes	9%	4%	4%	2%	4%	10%	5%	5%	4%
Rarely	1%	1%	0%	0%	1%	3%	3%	0%	1%
Never	0%	0%	1%	0%	0%	1%	1%	1%	0%

Note: The item's survey location is shown in parentheses after the item text. Percentages may not add to 100 due to rounding. "Always or Most of the time" may not equal the sum of the separate response option percentages due to rounding.

Table B-4. Average Percentage of Respondents for Overall Patient Safety Rating by Staff Position – 2023 SOPS ASC Database

Overall Patient Safety Rating	Staff Position								
	Anesthesi-ologist	Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon	Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
Please give your facility an overall rating on patient safety. (Item F1)									
Excellent or Very good	87%	97%	89%	97%	92%	79%	83%	74%	85%
Excellent	59%	81%	50%	78%	68%	42%	48%	41%	50%
Very good	29%	17%	38%	19%	25%	37%	35%	32%	35%
Good	9%	2%	7%	3%	6%	16%	13%	18%	13%
Fair	3%	0%	4%	0%	2%	4%	3%	7%	2%
Poor	0%	0%	1%	0%	0%	1%	1%	1%	0%

Note: The item's survey location is shown in parentheses after the item text. Percentages may not add to 100 due to rounding. "Excellent or Very good" may not equal the sum of the separate response option percentages due to rounding.

Table B-5. Item Average Percent Positive Response for Communication in the Surgery/Procedure Room by Staff Position – 2023 SOPS ASC Database

Communication in the Surgery/Procedure Room	Staff Position								
	Anesthesi-ologist	Doctor/ Physician (excluding Anesthesi-ologist) or Surgeon	Certified 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	124	202	67	34	233	239	220	125	226
# Respondents	376	1,156	182	73	731	2,627	952	238	841
In the past 6 months, how often were the following actions done in your facility?	% Always/Most of the time								
Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (Item G1)	96%	99%	96%	96%	98%	91%	93%	85%	100%
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)	70%	89%	68%	89%	78%	64%	70%	65%	100%
Immediately after procedures, team members discussed any concerns for patient recovery. (Item G3)	69%	91%	69%	90%	85%	69%	70%	65%	100%

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

Appendix B: Results by Respondent Characteristics

(2) Hours Worked Per Week

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

Note 2: The number of ASCs and respondents by hours worked per week in the ASC is shown in each table. The number of ASCs includes those ASCs that asked respondents to indicate how many hours worked per week in the ASC. However, the precise number of ASCs and respondents corresponding to each data cell in the tables will vary because ASCs may have omitted a specific survey item and because of individual nonresponse/missing data.

Note 3: Hours worked per week results may be related to respondent staff positions. For example, those who worked 1 to 16 hours per week were primarily Doctors/Physicians (excluding Anesthesiologists) or Surgeons. In addition, those who worked 17 to 31 hours per week were primarily nurses, and those who worked more than 40 hours per week were primarily in management.

Table B-6. Composite Measure Average Percent Positive Response by Hours Worked Per Week – 2023 SOPS ASC Database

SOPS Composite Measures	Hours Worked Per Week			
	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More Than 40 Hours
# ASCs	221	216	239	231
# Respondents	1,652	1,018	3,743	979
1. Organizational Learning – Continuous Improvement	94%	91%	90%	94%
2. Communication About Patient Information	95%	89%	86%	91%
3. Management Support for Patient Safety	93%	89%	87%	93%
4. Communication Openness	95%	88%	86%	93%
5. Teamwork	95%	86%	83%	89%
6. Response to Mistakes	92%	86%	82%	91%
7. Staff Training	89%	80%	77%	86%
8. Staffing, Work Pressure, and Pace	88%	70%	64%	78%
Composite Measure Average	93%	85%	82%	89%

Table B-7. Item Average Percent Positive Response by Hours Worked Per Week – 2023 SOPS ASC Database (Page 1 of 4)

Survey Items by SOPS Composite Measure	Hours Worked Per Week			
	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More Than 40 Hours
# ASCs	221	216	239	231
# Respondents	1,652	1,018	3,743	979
1. Organizational Learning – Continuous Improvement	% Strongly Agree/Agree			
This facility actively looks for ways to improve patient safety. (Item C1)	95%	93%	91%	94%
We make improvements when someone points out patient safety problems. (Item C3)	95%	92%	90%	95%
We are good at changing processes to make sure the same patient safety problems don't happen again. (Item C6)	93%	89%	89%	93%
2. Communication About Patient Information	% Always/Most of the time			
Important patient care information is clearly communicated across areas in this facility. (Item A1)	98%	95%	92%	96%
We share key information about patients as soon as it becomes available. (Item A7)	98%	95%	92%	96%
Within this facility, we do a good job communicating information that affects patient care. (Item A9)	98%	93%	91%	95%
	% Never/Rarely			
Key information about patients is missing when it is needed. (Item A5*)	85%	72%	70%	78%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Survey Items by SOPS Composite Measure	Hours Worked Per Week			
	1 to 16 Hours	**17 to 31 Hours**	**32 to 40 Hours**	**More Than 40 Hours**
# of ASCs	221	216	239	231
# Respondents	1,652	1,018	3,743	979
3. Management Support for Patient Safety	% Strongly Agree/Agree			
Managers encourage everyone to suggest ways to improve patient safety. (Item E1)	93%	88%	87%	93%
Management examines near-miss events that could have harmed patients but did not. (Item E2)	94%	91%	88%	94%
Management provides adequate resources to improve patient safety. (Item E3)	93%	89%	87%	93%
4. Communication Openness	% Always/Most of the time			
We feel comfortable asking questions when something doesn't seem right. (Item A2)	98%	94%	92%	96%
When we see someone with more authority doing something unsafe for patients, we speak up. (Item A4)	96%	90%	89%	94%
Our ideas and suggestions are valued in this facility. (Item A6)	92%	81%	76%	89%

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

Survey Items by SOPS Composite Measure	Hours Worked Per Week			
	1 to 16 Hours	**17 to 31 Hours**	**32 to 40 Hours**	**More Than 40 Hours**
# ASCs	221	216	239	231
# Respondents	1,652	1,018	3,743	979
5. Teamwork	% Strongly Agree/Agree			
When someone in this facility gets really busy, others help out. (Item B1)	97%	91%	88%	92%
Doctors and staff clearly understand each other's roles and responsibilities. (Item B4)	94%	87%	83%	89%
We work together as an effective team. (Item B8)	98%	93%	90%	93%
	% Strongly Disagree/Disagree			
Our facility allows disrespectful behavior by those working here. (Item B6*)	90%	73%	70%	83%
6. Response to Mistakes	% Strongly Agree/Agree			
Staff are treated fairly when they make mistakes. (Item C2)	93%	85%	80%	90%
Learning, rather than blame, is emphasized when mistakes are made. (Item C4)	92%	84%	79%	90%
Staff are told about patient safety problems that happen in this facility. (Item C5)	91%	88%	86%	93%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Table B-7. Item Average Percent Positive Response by Hours Worked Per Week – 2023 SOPS ASC Database (Page 4 of 4)

Survey Items by SOPS Composite Measure	Hours Worked Per Week			
	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More Than 40 Hours
# ASCs	221	216	239	231
# Respondents	1,652	1,018	3,743	979
7. Staff Training	% Strongly Agree/Agree			
Staff who are new to this facility receive adequate orientation. (Item B2)	90%	83%	78%	85%
We get the on-the-job training we need in this facility. (Item B5)	92%	87%	85%	89%
Staff get the refresher training they need. (Item B7)	90%	83%	81%	87%
	% Strongly Disagree/Disagree			
Staff feel pressured to do tasks they haven't been trained to do. (Item B3*)	86%	70%	64%	83%
8. Staffing, Work Pressure, and Pace	% Always/Most of the time			
We have enough staff to handle the workload. (Item A3)	91%	79%	72%	83%
There is enough time between procedures to properly prepare for the next one. (Item A8)	94%	82%	75%	88%
	% Never/Rarely			
We feel rushed when taking care of patients. (Item A10*)	79%	48%	45%	62%

Note: The item's survey location is shown in parentheses after the item text. An * denotes a negatively worded item, where the % Strongly Disagree/Disagree or % Never/Rarely indicates a positive response.

Table B-8. Average Percentage of Respondents for Near-Miss Documentation by Hours Worked Per Week – 2023 SOPS ASC Database

Near-Miss Documentation	Hours Worked Per Week			
	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More Than 40 Hours
# ASCs	221	216	239	231
# Respondents	1,652	1,018	3,743	979
When something happens that could harm the patient, but does not, how often is it documented in an incident or occurrence report? (Item D1)				
Always or Most of the time	95%	89%	89%	93%
Always	72%	58%	64%	68%
Most of the time	22%	31%	26%	25%
Sometimes	4%	8%	7%	5%
Rarely	1%	2%	3%	1%
Never	1%	1%	1%	1%

Note: The item's survey location is shown in parentheses after the item text. Percentages may not add to 100 due to rounding. "Always or Most of the time" may not equal the sum of the separate response option percentages due to rounding.

Table B-9. Average Percentage of Respondents for Overall Patient Safety Rating by Hours Worked Per Week – 2023 SOPS ASC Database

Overall Patient Safety Rating	Hours Worked Per Week			
	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More Than 40 Hours
# ASCs	221	216	239	231
# Respondents	1,652	1,018	3,743	979
Please give your facility an overall rating on patient safety. (Item F1)				
Excellent or Very good	93%	83%	82%	89%
Excellent	71%	50%	46%	65%
Very good	22%	33%	36%	25%
Good	5%	13%	14%	8%
Fair	2%	3%	4%	3%
Poor	0%	1%	1%	0%

Note: The item's survey location is shown in parentheses after the item text. Percentages may not add to 100 due to rounding. "Excellent or Very good" may not equal the sum of the separate response option percentages due to rounding.

Table B-10. Item Average Percent Positive Response for Communication in the Surgery/Procedure Room by Hours Worked Per Week – 2023 SOPS ASC Database

Communication in the Surgery/Procedure Room	Hours Worked Per Week			
	1 to 16 Hours	17 to 31 Hours	32 to 40 Hours	More Than 40 Hours
# ASCs	221	216	239	231
# Respondents	1,652	1,018	3,743	979
In the past 6 months, how often were the following actions done in your facility?	% Always/Most of the time			
Just before the start of procedures, all team members stopped to discuss the overall plan of what was to be done. (Item G1)	99%	91%	92%	94%
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)	84%	70%	66%	71%
Immediately after procedures, team members discussed any concerns for patient recovery. (Item G3)	85%	74%	69%	78%

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