

## EMS Culture Assessment on Patient Safety

In this survey, “**patient safety**” means preventing patient injuries, incidents, and harm.

This survey asks for your opinions about resident safety issues in this ground/air medical transport organization. It will take about 15 minutes to complete. To mark your answer, just put an X or a v in the box:  or .

If a question does not apply to your job or you do not know the answer, please mark the box in the last column. If you do not wish to answer a question, you may leave your answer blank.

### SECTION A

Over the past 12 month, how often have you had problems exchanging accurate, complete, and timely information with...

	Never ▼	Rarely ▼	Some- times ▼	Most of the time ▼	Always ▼	Does Not Apply or Don't Know ▼
1. Dispatching Services/Communication Centers?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
2. Long-term Care Facilities?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
3. Hospitals?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9

### SECTION B

How much do you agree with the following statements?

	Strongly Disagree ▼	Disagree ▼	Neither Agree nor Disagree ▼	Agree ▼	Strongly Agree ▼	Does Not Apply or Don't Know ▼
1. This service places much more emphasis on patient safety than on cost savings .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
2. This service is good at preventing mistakes.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
3. The way we do things in this service reflects a strong focus on patient safety.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
4. Staff clearly understand each other's roles and responsibilities .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
5. Staff work together as an effective team .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
6. In this service, all staff treat each other with respect ..	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
7. This service emphasizes teamwork in taking care of patients .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
8. Staff are treated fairly when they make mistakes .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
9. This service helps staff learn from their mistakes rather than punishing them .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
10. When an event is reported, it feels like the person is being written up, not the problem .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
11. Staff get the training they need in this service.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
12. Staff who are new to this service receive adequate orientation .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
13. Staff are only asked to do tasks that they have been trained to do .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
14. Staff have enough training on how to handle difficult patients .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
15. Problems occur during the transfer of patients to other healthcare providers .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
16. We have clear expectations about exchanging important information with other healthcare	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9

providers .....						
17. We have a standard procedure for communicating with other healthcare providers.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
18. My immediate supervisor encourages everyone to suggest ways to improve patient safety .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
19. My immediate supervisor listens to staff ideas and suggestions to improve patient safety.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
20. The actions of upper management show that patient safety is a top priority .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
21. Upper management seems interested in patient safety only after a patient safety incident happens .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9

**SECTION C**

How often do the following statement apply to this service?

	Never ▼	Rarely ▼	Some- times ▼	Most of the time ▼	Always ▼	Does Not Apply or Don't Know ▼
1. It is difficult to voice disagreement in this service.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
2. Staff opinions are valued in this service .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
3. When we see someone with more authority doing something unsafe for patients, we speak up.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
4. Tiredness impacts our service's job performance .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
5. Staff work longer hours than is best for patient care..	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
6. Staff take shortcuts to get their work done faster .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
7. All staff talk openly about problems in this service.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
8. Staff are willing to report mistakes they observe in this service .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
9. In this service, we talk about ways to keep patients safe.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
10. When staff report something that could harm a patient, someone takes care of it .....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
11. We make improvements when someone points out patient safety problems.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
12. Mistakes have led to positive changes in this service .	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
13. This service lets the same mistakes happen again and again.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9

**SECTION D**

A. How often do you travel to calls in a vehicle with other staff?

- Never (Skip question DB)     Rarely     Sometimes     Most of the time     Always

B. How often do the following statements apply to this service?

	Never ▼	Rarely ▼	Some- times ▼	Most of the time ▼	Always ▼	Does Not Apply or Don't Know ▼
1. While en route to a call, providers discuss the overall plan for the call.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
2. During the call, providers feel free to speak up about concerns.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
3. Checklists are used for high-risk, low frequency procedures.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9

## SECTION E

E1. Please give your work area/unit in this service an overall patient safety grade.

- A - Excellent
- B - Very Good
- C - Good
- D - Fair
- E - Poor

## SECTION F

F1. How many years have you worked in ground/air medical transport?

- a) I have never worked in ground/air medical transport
- b) Less than 1 year
- c) 1 to 2 years
- d) 3 to 4 years
- e) 5 to 7 years
- f) 8 to 10 years
- g) 11 to 15 years
- h) 16 to 20 years
- i) 21 or more years

F2. Which of the following best describes your primary role at your main EMS job?

- a) Paramedic
- b) Educator
- c) Preceptor
- d) Administrator/Manager
- e) First-line Supervisor
- f) Other patient care provider
- g) EMT
- h) Other non-patient care provider

F3. Volunteers are licensed EMS workers who receive nominal or no compensation for their provision of EMS services at the agency. At your main EMS job, are you a volunteer EMS provider?

- a) Yes
- b) No

F4. How long have you worked for this ground/air medical transport service?

- a) Less than 6 months
- b) 6 months to less than 1 year
- c) 1 year to less than 3 years
- d) 3 years to less than 6 years
- e) 6 years to less than 12 years
- f) 12 years or more

F5. How many hours per week do you work for this ground/air medical transport service?

- a) 1 to 8 hours per week
- b) 9 to 16 hours per week
- c) 17 to 31 hours per week
- d) 32 to 40 hours per week
- e) More than 40 hours per week

F6. How satisfied are you with your main job at this service?

- a) Very Satisfied
- b) Satisfied
- c) Dissatisfied
- d) Very Dissatisfied

**F7.** In the past 12 months, how many patient safety event reports have you filled out and submitted?

- a) No event reports
- b) 1 to 2 event reports
- c) 3 to 5 event reports
- d) 6 to 10 event reports
- e) 11 to 20 event reports
- f) 21 event reports or more

**Comments.**

Please feel free to write any comments about patient safety, error, or event reporting in this service.