



PATIENT SAFETY CULTURE SURVEY SYSTEM

USER'S GUIDE



Table of Contents

1.0	General Information	2
1.1	Overview	2
1.2	Statutory Authority	2
1.3	Authorized Use	2
1.4	Procedural Resources	2
2.0	System Summary	2
2.1	Logging In.....	3
2.2	Facility Search.....	3
2.3	Registration	3
2.4	Data Entry	5
3.0	Getting Started	6
3.1	Facility Contact and Designation	6
3.2	Administering the Survey.....	6
3.3	Compiling Survey Data	6
4.0	System Uploading	6
4.1	Email Access.....	6
4.2	Exporting Data	6
4.3	File Uploads	7
5.0	Survey Submission	8
5.1	Reporting.....	8
5.2	Survey Data Report.....	8

1.0 General Information

The Patient Safety Culture Survey (PSCS) System is a database application that allows Florida hospitals and ambulatory surgical centers (ASCs) to submit the requested patient safety culture data to the Agency for Health Care Administration (Agency). This guide is intended for use by the facility personnel or the contracted entity that has been designated to submit the survey results on behalf of their facility. This guide will provide step by step guidance for successful and timely submission of the PSCS data to the Agency.

1.1 Overview

The Agency has adopted an administrative rule, customized the Agency for Healthcare Research and Quality's (AHRQ) patient safety survey instruments, and developed a database application to facilitate the required submission of PSCS data from Florida hospitals and ASCs to the Agency as statutorily mandated.

1.2 Statutory Authority

Pursuant to [Florida Law Chapter 2020-134](#) which amended [s. 395.1012](#) and [408.05, F.S.](#), the Agency has adopted rule [59A-35.115, F.A.C.](#), Patient Safety Surveys. The rule specifies forms, timeframe requirements, and guidance for administering the surveys and submitting the data to the Agency.

1.3 Authorized Use

The PSCS system can only be accessed by the authorized facility designee after registering in to the PSCS system. The designee is the facility personnel or contracted entity designated by the Chief Executive Officer (CEO) and/or the facility's executive management team. The CEO and/or the executive management team will notify the Agency of the designee selection via email, which will authorize that personnel or entity to submit the survey data on behalf of the facility. The designee information be submitted to the Agency's PSCS@ahca.myflorida.com mailbox, prior to system registration.

1.4 Procedural Resources

- For facility specific forms, data entry tools, data specifications, and general information resources please visit the Agency's Patient Safety Survey homepage at: <https://ahca.myflorida.com/schs/committeescouncils/indexpscs.shtml>
- For the administrative rule information please visit: <https://www.flrules.org/gateway/ruleNo.asp?id=59A-35.115>
- To notify the Agency of the facility designee, and for system and process specific inquiries please contact the Agency's PSCS Team at: PSCS@ahca.myflorida.com.

2.0 System Summary

The PSCS system is a database application designed to receive all the surveying facilities compiled data. The system use is limited to authorized facility personnel or contracted entities. The designee will be emailed processing and confirmation notices, the system registration link, and the survey submission link.

2.1 Logging In

Designees will follow the emailed registration link to the PSCS log in screen. From here, users have the option to select Log In or Sign Up. If the user has a current Florida Discharge Data Collection System (FDDC) account they can select Log In and enter the email address associated with their FDDC account. If the user does not have a FDDC account, they should select Sign Up and create a PSCS user account. Once the account is created, the user will simply select Log In for future access.

2.2 Facility Search

Designees will follow the emailed registration link to the registration request page, where they will search for the intended facility. This search requires the facility's license number and facility's Agency file number.

Each designee must submit a registration request on behalf of their facility. Once approved the designee will receive email notification of a successful registration. The registration request will be approved within 3 business days by an Agency PSCS team member.

Directly above the search fields, is a registration check status button.

- Check Status - If a registration request has been submitted, you may check the status to verify if that registration request is pending, approved, or rejected.

(Note: A system registration request can be rejected if the facility submitter is not the designee that the Agency was notified of, or if the facility is requesting the existing registration to be returned to update any information. In the event a registration is rejected, email the PSCS@ahca.myflorida.com mailbox to resolve the matter.)


- Facility Search - All surveying Florida hospitals and ASCs have a license and Agency/AHCA file number. These two numbers serve as the search criteria used to find the intended facility.

Click here if you would like to check your facility status: [Check Status](#)

Please enter your facility license number and click **Find**.

License Number *

File Number *

☐ I'm not a robot  reCAPTCHA Privacy - Terms

[Find](#)

2.3 Registration

Successful registration into the PSCS system must be completed prior to submitting the compiled survey results to the Agency. System registration will open January 2025.

Once the facility search has pulled the intended facility, you will be asked to confirm the facility provider type, facility name, file, and license numbers.

Please verify the information below is correct and click **Next** or click **Back** to try again.

License Number: 4369
File Number: 100007
Facility Name: ADVENTHEALTH ORLANDO
Provider Type: HOSPITAL

Back


Next

After confirming the intended facility, the designee will be prompted to submit their title/position, the facility staff count, their full name, email address, and phone number.

Please verify the facility information and complete the fields below. Click **Submit** if everything is correct. Or, click **Back** to return to the previous page.

License Number:	4369	File Number:	100007
Facility Name:	ADVENTHEALTH ORLANDO	Provider Type:	HOSPITAL

Title/Position *	<input type="text"/>	Staff Count *	<input type="text" value="0"/>	
First Name *	<input type="text"/>	Middle Name/Initial	<input type="text"/>	Last Name * <input type="text"/>
Email Address *	<input type="text"/>			
Phone Number *	<input type="text"/>	Extension	<input type="text"/>	

<p>Back</p>	<div><input type="checkbox"/> I'm not a robot</div> <div> reCAPTCHA Privacy - Terms</div>	<p>Submit</p>
-------------	--	---------------

The designee will receive email confirmation that the registration request is being processed and to allow at least 3 business days for the PSCS team to review and approve the registration request.

Once the PSCS team has approved the registration request, the designee will receive email notification of successful registration into the PSCS system.

Note: If you cannot access a weblink directly please copy and paste the URL into your browser or device.

3.0 Getting Started

Before each facility begins this survey process, the designee should review the administrative rule, the facility specific tools, survey instruments, and administration guidance.

3.1 Facility Contact and Designation

The process outlined in rule [59A-35.115, Patient Safety Survey](#) requires the facility CEO/executive management team to determine who the authorized designee will be. The designation of this personnel or entity indicates that they are responsible for the submission of the survey data to the Agency. The Agency will cross reference the previously received designee information with the system registration request information to ensure the authorized party is emailed the survey submission link.

3.2 Survey Administration

The facility must decide whether facility personnel or a contracted entity will administer, compile, and submit the survey data to the Agency.

The survey may be administered using pen and paper or an electronic format, but the survey results must be compiled on the facility specific data entry tool and exported into the CSV file format.

3.3 Compiling Survey Data

The facility specific data entry tools correspond with either the Hospital Patient Safety Culture Survey, AHCA Form 3130-8015

or

Ambulatory Surgical Centers Patient Safety Culture Survey, AHCA Form 3130-8017, both available at:

<https://ahca.myflorida.com/schs/committeescouncils/indexpsecs.shtml>.

4.0 System Uploading

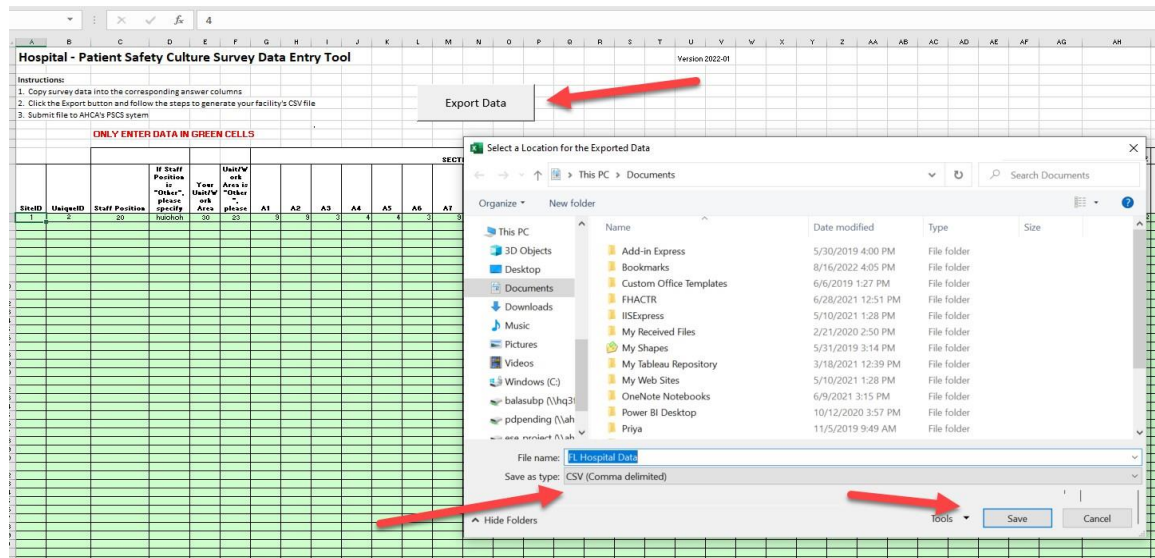
4.1 Email Access

Access into the PSCS system will be granted through email notification. The designee will be emailed:

- The system registration request link
- Notification of the registration request status
- The survey submission link
- Notification of the survey submission status

4.2 Exporting Data

The survey results will be compiled on the facility specific data entry tools and exported into a CSV file for submission.



4.3 File Uploads

After the survey data has been compiled and exported into a CSV file, that file is ready for final submission.

The designee will use the submission link in the email previously received upon successful registration, to submit the survey data to the Agency.



Hello,

This email serves as confirmation of successful registration into the Patient Safety Culture Survey System.

Designated Facility Personnel or Entity - Meredith Hayes

Facility Name - ADVENTHEALTH ORLANDO

Facility Type - Hospital

License Number - 4369

File Number - 100007

(If the above information is incorrect, please email PSCS@ahca.myflorida.com with the requested updates)

Please visit: <https://ahca.myflorida.com/schs/committeescouncils/indexpscs.shtml> for information and assistance on administering the Agency's Patient Safety Culture Surveys for Hospitals and Ambulatory Surgical Centers.

When you are ready to submit your facility's final survey data to the Agency, please use the link below:

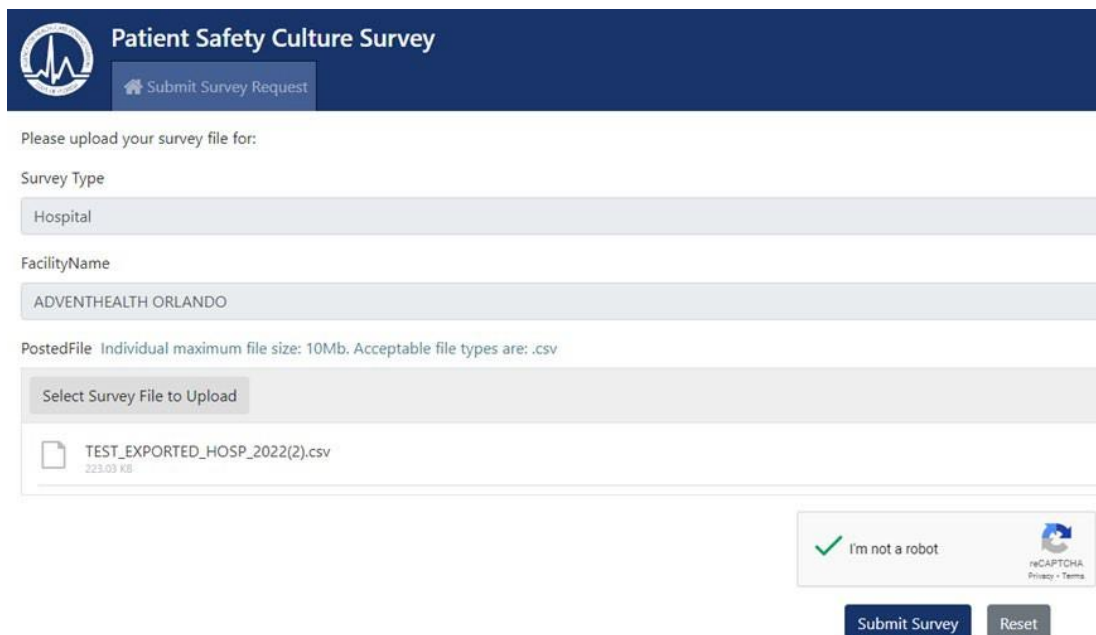
<https://apps.ahca.myflorida.com/pscs/Submission?code=04272398-7232-4a40-b377-66220c0b3a91>

Thank you.

Note: If you cannot access a weblink directly please copy and paste the URL into your browser or device.

5.0 Survey Submission

After the survey data has been exported into the CSV file and uploaded to the PSCS system, the designee will submit the survey data to the Agency.



The screenshot shows the 'Patient Safety Culture Survey' submission page. At the top, there is a dark blue header with a logo on the left and the text 'Patient Safety Culture Survey' and 'Submit Survey Request' on the right. Below the header, a message says 'Please upload your survey file for:'. There are two input fields: 'Survey Type' with 'Hospital' selected, and 'FacilityName' with 'ADVENTHEALTH ORLANDO' entered. Below these is a 'PostedFile' section with a note: 'Individual maximum file size: 10Mb. Acceptable file types are: .csv'. There is a 'Select Survey File to Upload' button and a file named 'TEST_EXPORTED_HOSP_2022(2).csv' (223.03 KB) is listed. At the bottom right, there is a reCAPTCHA 'I'm not a robot' checkbox, a 'Submit Survey' button, and a 'Reset' button.

The designee will receive email notification that the submission has been received and accepted for the reporting year within 3 business days.

(Note: If a survey submission is rejected the designee will receive email notification of the reason why and instruction on how to resubmit the survey data.)

5.1 Reporting

The survey must be administered within two years of the effective date of rule 59A-35.115, Patient Safety Surveys, and thereafter, on at least a biennial basis. Each facility must submit the PSCS data to the Agency between June 1st and August 31st of the biennial reporting year.

5.2 Survey Data Report

The survey data findings will be published as available in accordance with section [408.05\(3\)\(d\)3., F.S.](#) and made available at: <https://ahca.myflorida.com/schs/committeescouncils/indexpscs.shtml>.