In the SAQ the data is represented as subscale scores and as individual items. Higher subscale scores indicate positive attitudes and high performance in the domain of safety culture.

#### SAQ Short Form Subscales and Items

Domain	Question numbers
Teamwork climate	1 - 6
Safety Climate	7 – 13
Job satisfaction	15 – 19
Stress recognition	20 - 23
Perceptions of	24 - 28*
Management	
Working conditions	29 - 32

<sup>\*</sup> These are each asked twice. Once for Unit Managers and once for Hospital Managers

NB. Items 14 & 33-36 are not part of the scales above, they are reported as individual items – this is outlined in the survey reporting template

#### How the SAQ is scored

The SAQ contains three negatively worded items (Items 2, 11 and 36), which must be reverse scored before calculating subscales and items. Questionnaires that use a Likert scale (e.g. strongly disagree, disagree, neutral, agree, strongly agree) for answering questions may contain items that must be reverse scored. For example, in the SAQ there are positively worded items (e.g. 'Morale in this clinical area is high'), and some negatively worded items (e.g. 'Communication delays that lead to delays in delivery of service are common').

In this example, we attribute an answer of *strongly disagree* with a score of 1, *disagree* = 2, *neutral* = 3, *agree* = 4 and *strongly agree* = 5 for each positively worded question, as this would give high agreement items a high score. However, we cannot use the same scoring for the negatively worded items and so we reverse score those items. Reverse scoring means that the numerical scoring scale runs in the opposite direction. So, in the above example *strongly disagree* gets a score of 5, *disagree* would be 4, *neutral* still equals 3, *agree* becomes 2 and *strongly agree* = 1.The SAQ negatively worded items have already been reverse scored within the QARS survey, so no further data manipulation is required for Safety Culture Leads.



## Importing the SAQ data into the Excel spreadsheet from QARS



Data from QARS can be transferred to a specially formatted excel spreadsheet to calculate domain scores.

All instructions for transferring and reviewing data are in the Excel spreadsheet

Once the survey closes, export the data file in Excel (.xls or .xlsx). Enter in the data for each case (i.e. case means each individual who completed survey responses).

#### Step 1: Download raw data from Results/Report in QARS



### Step 2: Delete all comment questions from the raw data file

AD	AE	AF	AG
	Q5: Management supports my daily	Q5: Management supports my daily	
Q4: Comment	efforts   Matrix1: Unit Management	efforts   Matrix2: Hospital Management	Q5: Comment
	Disagree Slightly	Disagree Slightly	
	Disagree Slightly	Disagree Slightly	
	Neutral	Neutral	
	Agree Strongly	Agree Strongly	
	Disagree Slightly	Neutral	
	Agree Strongly	Agree Strongly	
	Disagree Slightly	Neutral	
	Agree Slightly	N/A	
	Agree Slightly	Agree Slightly	
	Disagree Slightly	Neutral	

**Step 3:** Enter in the data for each case (e.g. each individual's completed survey.) in the Sheet "Raw\_Data" in the second row highlighted in Orange,

# Important point to remember is when pasting data in the RawData tab instead of deleting the rows you should use "Clear contents" option.



Please do not replace the data in the first row You can copy and paste from the excel spreadsheet exported from QARS RawData sheet has allowed for <u>10,000 respondents</u>

**Step 4.** Questions 2, 11 and 36 have already been reverse scored within the QARS survey, so no further data manipulation is required.



**Step 5.** Refresh the data in the Sheet Demographic\_Summary by following the below steps

> Click on Data Tab --> Refresh All



Click on the facility filters in both the tables and ensure all the listed facilities are selected including blank.

Facility	y ्र	Facility	Service
WNSWLHD-Dubbo     WNSWLHD-Cowra District Hospital		SWNSWLHD-Dubbo	<ul> <li>Anaesthetics</li> <li>Emergency</li> <li>Gastroenterology</li> <li>Anaesthetics</li> </ul>
Grand	Search	Grand Total	- Emergency - Gastroenterology
	OK Cancel		

#### Step 6. Refresh the data in the Sheet Subscale\_Score by following below steps

- Click on facility filter dropdown
- Ensure all the facilities in the filter are selected including blank and click OK to complete
- Do the same process as above for the service filter

Facility	(All)	-
Service	(All)	-



**Step 7.** The subscales will automatically calculate in the sheet Converted\_Data.

## Score interpretation

The subscales will automatically calculate in the SAQ Subscale and Item Calculator. Subscale scores and meaning are outlined below.

Score	Meaning	
Above 80 is	This is a strength and groups should consider how to leverage	
excellent	their strengths in other areas	
	<b>High average: 70-79:</b> This is nearly a strength and may only require fine tuning to turn this into excellent. Groups should ask themselves 'what is required to go from good to excellent?'	
50-79 is average	Medium average: 60-69: This is a neutral result. Groups should explore what underpins this result in facilitated discussion s or staff debriefs to better understand what is needed to improve in this area.	
	Low average: 50-59: This is bordering on poor and can be considered an area for improvement.	
Below 50 is poor	This indicates a priority area and requires discussion amongst the team and action planning for improvement.	

# **Reporting the SAQ score interpretation**

There is an SAQ report PowerPoint template available on the CEC website for Safety Culture Leads to populate. Simply type in the relevant subscale and item numerical score and descriptor into the relevant section. Below is an example.

Subscale	Subscale scores	Score interpretation
Teamwork Climate	75	High average
Safety Climate	69	Medium average
Job Satisfaction	80	Excellent
Stress Recognition	49	Low
Perceptions of Management (Unit)	78	High average
Perceptions of Management (Hospital)	65	Medium average
Working Conditions	54	Low average



