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General Comment

I fully support the expansion of CAHPS surveys to the Outpatient and Ambulatory Surgery Patient Experience. However, the proposed questionnaire needs revisions.

It is important that each question provides actionable insights that facility operators can change to improve.

It is important that each question should be singular in focus and direct.

Many of the rating questions are two points: yes or no. This is too limiting to implement change. The questions would be so much better if the scale matched the H-CAHPS: Always, Usually, Sometimes and Never. For example, how often did nurses treat you with courtesy and respect? Always-Usually-Sometimes-Never. Another example: How often did areas around you appear clean? Always-Usually-Sometimes-Never.

Q7 Q9. Currently these questions ask about three distinct groups of staff in the same question: doctors; nurses and other staff. Please break these questions apart. It would be impossible to make improvements if the scores were low because the question is too broad. Please frame the question similar to H-CAHPS: series of questions for doctors and a series of questions for nurses. You could then ask the same series of questions for clerks and receptionists. It would also be helpful if the series of questions matched H-CAHPS: courtesy and respect; listen carefully; explain in a way that you could understand.

These questions could also be used in the anesthesia section very easily. The questionnaire then would have actionable items for each grouping of staff.

The questionnaire asks about pain questions. Please use the pain questions from the H-CAHPS questionnaire.

Since this is a surgery procedure, there will be pain and there will be nausea. It is faulty to ask questions if a patient had pain and if a patient had nausea/vomiting because undoubtedly the patient will experience both. I think it is much better to frame the questions similar to H-CAHPS.. did staff do everything they could

Q1 and Q2. Do not ask these questions as this information is provided by the doctor. The OP Surgery Center is not involved in providing the procedure information. This rests fully with the providers office. If there is a low score, there is nothing the OP Surgery Center can do to improve.

There are no questions about new medicine. I think it would be helpful to add the new medicine questions that are currently used on H-CAHPS.

The About You section is too long. Please limit this section to match H-CAHPS.