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Nurture Africa: Patient Journey Map

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PATIENT JOURNEY MAP

FOR HEALTH WORKERS AT NURTURE AFRICA

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Executive Summary

Nurture Africa (NA) provides a number of services to vulnerable families in Uganda. In February 2017, the organization implemented a cross-subsidy payment system for its primary health care (PHC) services in the hopes of generating revenue while still providing free or inexpensive care to vulnerable families. Implementation of the new payment system (hereafter known as “payworthy services model”) resulted in a significant reduction in the number of clients accessing Nurture Africa’s PHC services. We were tasked with identifying ways in which the patient experience could be improved.

The “Patient Journey Map” (Figure 1) is a graphic representation of what clients encounter when accessing PHC services at Nurture Africa. This map encompasses the entire arc of engagement between Nurture Africa and its clients. The patient journey begins when a client hears about Nurture Africa for the first time. It includes each touchpoint for the client while they are at the health center, and concludes when the client exits “prematurely,” recommends Nurture Africa to someone else, chooses another health center, or returns to Nurture Africa.

The map was developed during seven weeks of in-field research conducted in Nansana, Uganda in June, July and August 2017. We performed a

number of research activities to understand the patient experience from start to finish. With the help of a translator, we administered written surveys and conducted structured interviews with PHC clients who came through the health center. In order to paint a more detailed picture of the patient experience, we conducted focus groups with current and former clients, observed the flow of PHC clients through the health center, and interviewed employees in Nurture Africa’s health center.

We have identified three key “pain zones” within the patient journey negatively affecting the client experience. The pain zones that most need addressing we have labelled as “client intake,” “cashier” and “clinician and laboratory.” The subsequent descriptions of each pain zone outline the key client experience at that zone and the system dynamics centered at that zone. We provide recommendations that Nurture Africa may implement to improve the client experience in each pain zone.

The data base for this report is the same for the complementary Transition Analysis Report. Therefore, if read together, there will be some redundancy in reporting. This report is primarily targeted towards health workers and health care management at Nurture Africa.



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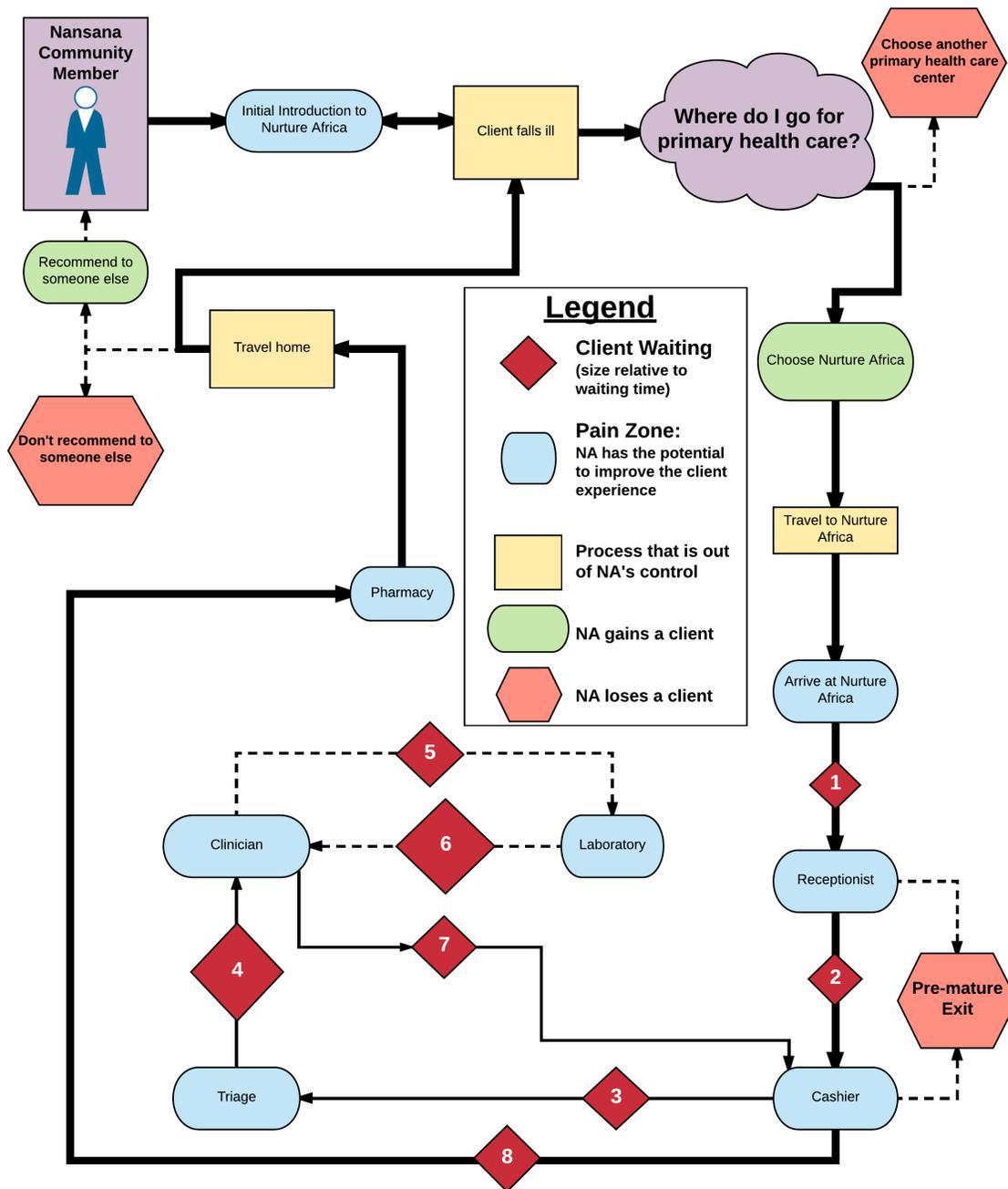


Figure 1: Nurture Africa PHC Patient Journey Map. This diagram shows the current flow of clients receiving PHC services at Nurture Africa.

Key Pain Zones

Intake

The “intake” section of the Patient Journey Map begins when the client arrives at the Nurture Africa property and visits the receptionist in the PHC clinic. This section is significant as it represents the point at which the client is forming their first impressions of Nurture Africa and the PHC clinic. We have designated this section as a pain zone within the patient journey because clients may exit the PHC system prematurely during intake (Figure 2). Since the payworthy services model was implemented in February, there has been a significant reduction in the number of clients coming to Nurture Africa for PHC services. Additionally, a significant number of clients have been leaving the clinic after learning about the payworthy services model. Fortunately, within this section of the patient journey there are also opportunities for Nurture Africa to improve the client experience and ensure that every client forms a positive first impression of Nurture Africa.

The Patient Experience

After completing their physical journey to Nurture Africa, the client then arrives at a large, metal gate. As they enter through the gate the client is approached by Nurture Africa’s security guards. The client is then asked to sign into the guestbook while the guards perform a search of the client's

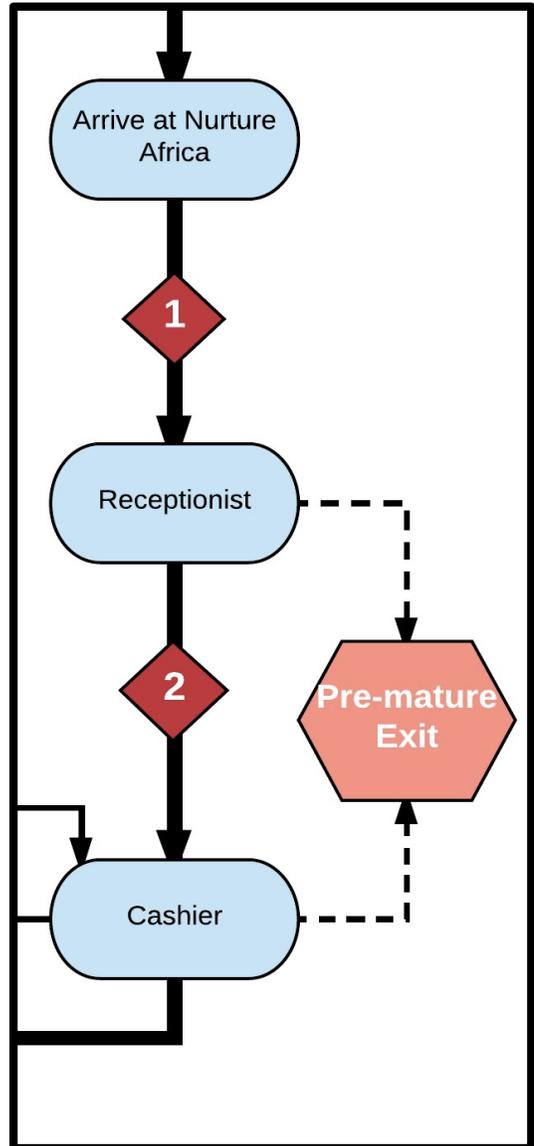


Figure 2: Intake section of the Patient Journey Map. Includes client arrival at Nurture Africa and check in at reception.

bags and belongings. After passing through the security checkpoint, the client then has access to the entire Nurture Africa property. The property is comprised of several buildings including the PHC and HIV clinics, a small canteen shop, a physiotherapy clinic, a library, and outdoor,



covered seating areas. The client then walks to the reception area of the health center.

When the client arrives at the reception area they are not always greeted by the receptionist immediately. Sometimes clients must wait for the receptionist to finish working with another client, or they must wait for the receptionist to return to her desk.* The PHC reception area is comprised of the receptionist's desk and many benches so clients may sit while they wait. The PHC reception area is decorated with paintings of characters from the movie *The Lion King*. Once it is the client's turn, the receptionist brings them behind the desk and checks them in on the computer. If the client is new, the receptionist will create a patient profile for them within the computer database, as well as explain the payworthy services model to them. If the client is unaware of the payworthy services model or does not have enough money, he or she may leave Nurture Africa. This is the first possible premature exit of the patient journey. If the client does have enough money, the receptionist will then measure their height and weight and direct them to the cashier to pay for their consultation fee.

Data and Observations

From interviews with current PHC clients, we learned that some clients felt daunted by the gate and uncomfortable with the guards' search of their belongings. However, many others expressed that the security measures made them feel very safe

* Figure 2, client waiting at <1>

and comfortable at Nurture Africa. Given the open green space and beauty of the Nurture Africa property, many clients reported having positive initial impressions of the environment and feeling comfortable and relaxed.

From observations in the PHC reception waiting area, we noticed that the benches were often occupied by Nurture Africa volunteers. This may confuse clients because they do not know where to sit, and may make them feel unwelcome. Compared to Diva Medical Center and Sebbi Medical Center, two other private healthcare providers nearby, Nurture Africa has a reception area that is less professional and educational. The walls at the other clinics are adorned with health education posters, as well as posters detailing the types of services offered and insurances accepted at the clinics.

Additionally, we often observed that the receptionist was not at her desk when clients arrived. While some clients sat down and waited for her to return, others began to wander into the clinic and look for someone to attend to them. Despite these observations, 90% of patients indicated in our written survey that they considered the wait time at the reception to be short.* Furthermore, 97% of current clients that filled out the written survey agreed that the receptionist was friendly and treated them with respect. However, in interviews and focus group discussions, many clients indicated that they had experienced negative interactions with the receptionist. They

* Fig 2, client waiting at <1>



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reported that the receptionist was rude, did not have a good attitude when interacting with them and negatively impacted their experience at Nurture Africa. Given this contradiction, it is possible that the data from our written survey could be biased. The survey was filled out orally in the reception waiting area and within earshot of the receptionist. It is likely that clients were less inclined to reveal their true opinions about the receptionist if she was in close proximity. Furthermore, if our research assistant was not available, the receptionist assisted clients in filling out the survey; this may have added bias to the results. Thus, the concerns of the clients in the focus groups should be taken seriously.

Although the payworthy services model was fully implemented in February 2017, during our time at Nurture Africa the receptionist revealed that 1-2 clients per day still come to Nurture Africa expecting to receive free care and leave after discovering they have to pay.[†] Moreover, since implementation, incidents have been reported in which clients think the receptionist is lying to them about the payworthy services model and trying to cheat them out of their money. From our written survey, we discovered that more than 75% of clients did not know approximately how much they were going to have to pay prior to arriving. This indicates an acute need for greater education regarding Nurture Africa's payworthy services model.

[†] Fig. 2, "Pre-mature Exit"

Recommendations

Intake is a crucial step in the patient experience: Nurture Africa should seek to guarantee that all clients have a positive first impression of the health center, including the PHC staff. To ensure that all clients feel comfortable with being searched upon arrival, we suggest that greater customer care training be given to the Nurture Africa security guards. This will make sure that all clients understand why they are being searched, as well as make certain that all searches are being conducted in an appropriate manner.

Given the multiple buildings and many activities typically occurring at Nurture Africa, a new client may not be able to discern where to go after passing through security. To ensure that clients feel secure in their knowledge of where to go when they arrive, we suggest that a sign be placed outside the PHC health center building that directs clients to the reception area. Additionally, we recommend that during the summer months volunteers be restricted from congregating in the PHC reception area to allow clients to sit near the receptionist. Also, we suggest that the reception waiting area be repainted to reflect a more professional and clinical environment. While the animal paintings look nice, they also have the potential to reinforce the misconception within the community that Nurture Africa only treats children. Instead, we propose that the reception waiting area be decorated with posters and signs that explain the various health services offered at



Nurture Africa, as well as the payworthy services model. Moreover, we suggest that a poster communicating the mission, vision and values of Nurture Africa be hung. This will ensure that all clients are aware of Nurture Africa's values and serve as a reminder to staff of the values they should be embodying in their work.

As the receptionist is the first member of the clinic staff who interacts with clients, we recommend greater customer care training for the receptionists. This customer care training should involve instruction on how to greet clients and what attitude to adopt when interacting with them. Additionally, it should include information on how to accurately explain the payworthy services model to clients, with a provided script. The receptionist should also be given instructions on how to deal with a difficult client and how and when she should allow the client to talk to management. Reiterating that the receptionist is crucial in the formation of a client's first impression of Nurture Africa may prove helpful during this training.

In regards to the receptionist's activities, we suggest she is reminded to stay at her desk at all times to ensure that all clients are greeted and provided service as quickly as possible. Especially during lunchtime, it is essential that the receptionist work with other members of the clinic staff to ensure that there is always someone at the reception desk and that clients are being attended to.

In order to respect patient privacy to a higher degree, we suggest that the measurement of the

client's height and weight be performed in the triage room by nurses rather than at reception. Moreover, the measurement of height and weight fall more into the skill set of the nurses than the receptionist. Because the receptionist expressed a greater desire to educate patients about Nurture Africa's services, we recommend that she be given greater educational materials with which to do so. Nurture Africa should create pamphlets to educate clients and members of the Nansana community about the PHC payworthy services model, as well as information regarding Nurture Africa's other health services, vocational training programs and sustainable livelihood loans. (See Appendix A for more information on marketing pamphlets.)

The idea that some clients believe the receptionist is trying to steal their money when she explains the payworthy services model further suggests the need for official signage in the waiting area that outlines the payworthy services model and reinforces the explanation of the receptionist. It is also imperative that the receptionist have a correct price list of drugs and lab tests, broken down into payment groups, that clients may reference.

Additionally, we suggest that Nurture Africa invest in a company mobile phone to be used by the receptionist during business hours. Clients may call and ask the receptionist questions about the services and costs of PHC at Nurture Africa, rather than having to travel all the way to the property. This should eliminate premature exits due to a lack of knowledge about the payworthy services model.



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Cashier

The “cashier” section of the Patient Journey Map has been marked as a pain zone because there is the risk of clients prematurely exiting from the patient journey due to monetary restrictions. Additionally, as indicated in the graphic version of the Patient Journey Map below (Figure 3), the client’s two trips to the cashier results in a bottleneck at the cashier and, ultimately, longer waiting times for clients. Through a restructuring of the payment methods, as well as greater education regarding the price of services, these issues can be mitigated and patient flow and experience can be improved.

The Patient Experience

After checking in at reception, the client will be directed to the cashier’s window. They will then either be greeted by the cashier or wait until the

cashier finishes attending to another client.* When the client is called up to the window, the cashier will charge them for their consultation fee based on their classification as either a Bronze, Silver, Gold or Platinum client. The client will then pay in cash for their consultation fee and the cashier will direct them to the waiting area for the triage room. These activities represent the client’s first visit to the cashier.

After a client receives a diagnosis and a prescription from the clinician, they must go to the cashier again to pay for the lab fees and drugs.† The client will pay in cash for these items and the cashier will print the client a handout that summarizes their visit to Nurture Africa for PHC services. However, the cashier must leave his office and walk through the clinic each time he needs to print. The cashier will then direct the client to the pharmacy to pick up their prescription.

This second visit to the cashier acts as a potential,

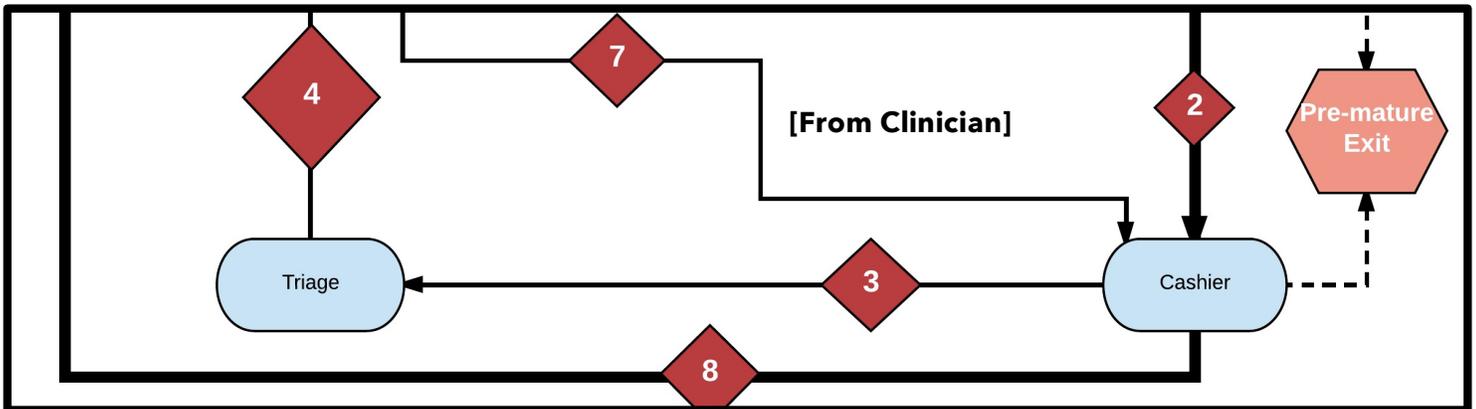


Figure 3: Cashier Section of the Patient Journey Map.
Includes the points when/where clients pay consultation fees and lab and drug fees.

* Fig. 3, client waiting at <2>

† Fig. 3, client waiting at <7>

premature exit point for clients, as some may not have enough money to pay for their lab fees and drugs.* Clients in this situation will either leave Nurture Africa or call a friend or family member to bring them money.

Data and Observations

Data from our written survey indicates that 94% of clients thought the wait time at the cashier to pay their consultation fee was short. Additionally, 97% of clients agreed that the cashiers were friendly and treated them with respect. In regards to the prices of the services, 76% of clients agreed when asked if they think they pay a fair price at Nurture Africa. However, only 16% of clients agreed when asked if they knew approximately how much they were going to have to pay prior to arriving.

While each client's medical needs are different and it is impossible to predict exactly what a visit to the Nurture Africa PHC clinic may cost, we observed that sometimes the cost of services or prescriptions were miscommunicated to clients. This mainly occurred because the clinician did not have an accurate breakdown of the lab and drug prices for clients in the different payment tiers. Instead he only had the full-cost price list. Clients were then misinformed that their prescriptions and lab fees were going to be more expensive than intended and some left the clinic thinking they wouldn't be able to afford them.

Another issue that clients discussed in our interviews and focus groups involved the quantity of drugs that the Nurture Africa would dispense. Clients complained that they could not afford to purchase the full prescription but were not allowed to purchase partial prescriptions. Some clients indicated their desire to be able to pay for the amount of drugs they could afford with the money they had on hand, then come back and purchase the rest of the prescription when they had more money.

In regards to patient flow through the clinic, the fact that clients must go to the cashier twice is problematic. The client's two trips to the cashier creates a sub-process within the greater macro-loop of the patient journey. While the number of PHC clients per day remained low during the research period, when the number of daily clients increases, there will be a significant bottleneck produced at the cashier. This obstruction of patient flow will reduce the efficiency and capacity of the entire clinic.

Recommendations

Currently Nurture Africa only accepts cash payments for medical services. To accommodate clients who do not have enough cash, but can pay with mobile money, the cashier sometimes uses his personal mobile phone, goes off-site to collect the cash and then deposits the cash in the Nurture Africa cash box. However, on his personal phone the cashier can only accept mobile money from one phone network and is therefore unable to

* Fig. 3, "Pre-mature exit"



accommodate all clients. To mitigate the constraints and risks associated with the cashier using his personal mobile phone, we suggest that Nurture Africa invest in a company mobile phone to be used by the cashier that has SIM cards for both Airtel and MTN. Implementing a mobile money system at Nurture Africa will reduce the number of premature exits for clients who do not have enough cash to pay for their services.

In order to increase the accuracy of the information being provided to clients about the cost of services and drugs, we recommend creating a standard pricing sheet that is available in all health worker stations. This sheet will indicate the costs of services and drugs for patients in each payment tier and will allow health workers to give each patient individualized, correct information about the costs associated with their visit. Along with the standard pricing sheet, this strategy should include signage in the reception waiting area that explains the payworthy services model and a pamphlet for community health workers to hand out which lists the prices of the different services and drugs offered at Nurture Africa for each payment tier. Through these strategies, greater transparency can be achieved regarding the new payworthy services model and the cost of all services and drugs. This will help combat misinformation that is present in the community and ensure that all clients have a more accurate idea of how much money they should bring when coming to Nurture Africa for PHC.

To address issues in patient flow, we recommend that the cost of the consultation fee be

incorporated into the costs of lab and drug fees, a system that would mimic that of Sebbi Medical Center and Diva Medical Center. This means that the prices of labs and drugs will increase slightly to absorb the cost of the consultation fee. However, the total cost to the client will remain the same. Changing the structure of the payments will enable the client to go to the cashier only once. The visit to the cashier would occur after the client has received their diagnosis and prescription from the clinician, but prior to going to the pharmacy. Additionally, this change will reduce the number of premature exit points for clients, ensuring that everyone receives the care they need.

We recognize that there is a potentially significant drawback to this system. There is the potential that some clients will receive treatment and then not be able to afford the payment. However, this can be minimized through community outreach and education. Furthermore, PHC clients pay less at Nurture Africa than other health centers nearby.

We recommend buying a new printer for the cashier's office to reduce client waiting time. Additionally we recommend that protocols be developed in regards to the purchase of partial prescriptions. While partial prescriptions may be a concern for certain types of drugs such as antibiotics, we recommend that SOPs be developed defining the specific circumstances under which purchasing a partial prescription may be allowed. Lastly, we recommend that research be conducted into the potential for clients to use community-based medical insurances when paying for services at Nurture Africa.



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Clinician & Laboratory

The main reason that clients visit Nurture Africa for primary health care is to see a clinician who can diagnose their illness and provide a drug prescription. Most clients visit the clinician twice during the patient journey: once for the initial consultation, then again for a diagnosis after they get a blood and/or a urine test at the laboratory. Reasons for a diminished patient experience in this zone include long wait times, poor customer service, and poor communication regarding the client’s illness and the prices of their drugs and lab tests. Potential solutions include increasing the number of staff in the laboratory, providing customer service training for the clinicians and posting a standardized price list for all staff who work with PHC clients.

The Patient Experience

After leaving the triage station, clients walk to the waiting area near the clinician’s office. Sometimes the triage nurse escorts the client to the waiting area. There is often a television at this waiting area playing health-related, informational videos on repeat. These videos have the potential to be very irritating as they are relatively short and the patient may have to watch them multiple times if they are waiting for a long period of time. Clients often spend a long time waiting for their initial consultation with the clinician.*

When the clinician is ready to see a client, he calls their name from his office. Upon entering the small office, they must sit or lie on a bed that does not have linens or paper to cover it, and may be dirty from the last patient. The clinician performs a brief physical examination of the client and asks some diagnostic questions. The clinician will then send most clients to the lab, but does not usually explain what test he is ordering.

The client must walk across the health center to a small waiting room in the hallway next to the lab. Patients sometimes wait here for a long time before having their samples taken by one of the lab technicians.* Once they have provided the lab technician with a sample, the client walks back to the waiting area in front of the clinician’s office.

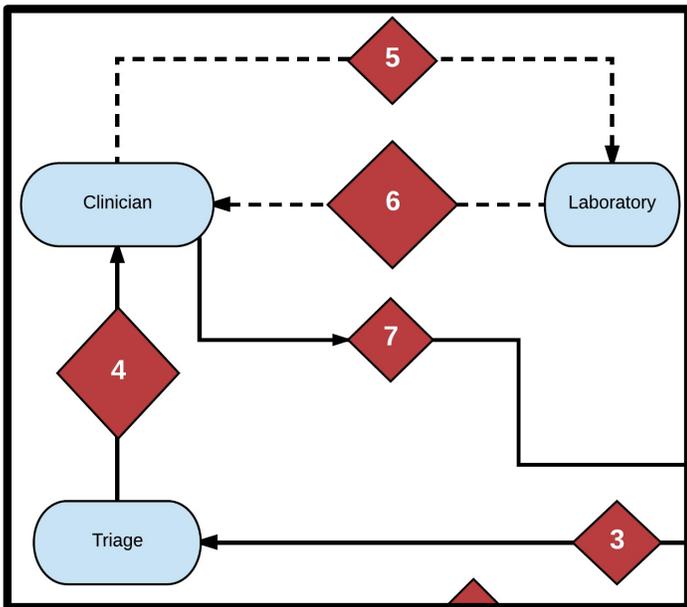


Figure 4: Clinician and Laboratory Section of Patient Journey Map. Includes initial clinician consultation, lab tests and clinician diagnosis.

* Fig. 4, client waiting at <4>

* Fig. 4, client waiting at <5>

Patients often wait a very long time to see the clinician a second time.[†]

When the client's lab results are ready, the clinician will call the client into his office a second time, where he explains the results of the lab tests and tells the client what drug he is prescribing. The clinician may tell the client the price of the drug if asked, but we observed that this information is not always accurate based on what tier the client belongs to. After receiving a prescription from the clinician, the client then goes to the cashier for the second time.

Data and Observations

Most clients who responded to our survey stated that they expected to see a clinician immediately after paying for the consultation. However, clients must go to the triage station and then wait a significant amount of time to see a clinician for the initial consultation. The second longest waiting point during the patient journey is before the initial consultation with the clinician. Over half of the clients who responded to our survey stated that the wait at this point was medium to very long.

Factors influencing the wait time at the clinician include:

- the number of PHC clients at Nurture Africa on a given day
- the number of HIV clients in the clinic and the availability of another clinician to see them
- whether the clinician is taking his lunch
- the number of clients returning to the clinician to clarify their diagnosis.

The observed hygiene in the clinician's office at Nurture Africa was below the standards of Diva Medical Center and Sebbi Medical Center. At Nurture Africa, there are no linens on the examination bed and often no alcohol or cleaning solution to sterilize the bed in between patients. At Diva and Sebbi there were alcohol and clean linens. Clinicians at Nurture Africa stated in staff meetings that the hygiene of the beds is an issue that must be addressed.

In interviews and focus groups, many clients emphasized that the attitude of the clinicians was important to them. Clients stated that it is important to them that the clinician spend enough time with them analyzing their or their child's sickness. They also stated that it is important for the clinician to have compassion for the clients. While many stated that the clinicians were very caring, others complained that the clinicians did not have good attitudes towards clients. One client said that a clinician left her in the examination room and went to have breakfast. Another

[†] Fig. 4, client waiting at <6>

important factor was the perceived experience or skills of the clinicians. Many clients stated that the clinicians at Nurture Africa seemed intelligent and experienced.

Although some parents appreciated the speed with which the clinicians treated their children, others complained that the doctors did not spend enough time assessing their children's sickness. One client said, "They just want to give medicine and send you away." Another client stated that the clinician minimized her sickness by asking her "how the flu could bring her this far." Other patients suggested that Nurture Africa should orient the clinicians because "most of them have poor communication skills." Many clients also requested that Nurture Africa hire specialists to address a wider range of health issues.

We also observed that health workers often walk into the clinician's office during consultations. This has serious implications because interrupting a consultation is an invasion of the client's medical privacy and makes the client feel disrespected.

At the laboratory, clients often wait a long time because there are only two employees to take samples, run tests and write reports. The results of client surveys indicate that waiting for lab samples to be taken was the third longest step in the patient journey. Patients must wait a long time to receive their lab results for a variety of reasons. For one, some of the lab tests take up to an hour to complete. This has a cascading effect: the lab technicians get tied up running long tests, which forces them to forgo completing some shorter

tests for other patients. The lab technicians identified the lack of personnel in the lab as a problem which causes an increase in client wait time, and additionally complained about feeling overworked. Despite waiting a long time to have their samples taken, patients were generally pleased with the care they received at the lab: 96% of respondents to our survey stated that the laboratory technicians were friendly and treated them with respect. Many patients were very pleased that Nurture Africa does blood tests before making a diagnosis or prescribing drugs.

The longest waiting time in the entire patient journey occurs when clients are waiting for their lab results.* Only 23% of patients characterized this wait time as short.

A number of clients complained that the clinician did not explain his or her diagnosis effectively. We observed clients returning to the clinician to receive clarification on what their diagnosis was. This indicates a poor degree of communication from the clinician to the client.

Recommendations

Although the number of clients waiting to see the clinician is out of Nurture Africa's control, we recommend implementing a system that prioritizes PHC clients at one of the clinicians when there are two clinicians on duty. This will reduce the wait

* Fig. 4, client waiting at <6>



time of PHC clients and improve their overall patient journey. If there are no PHC clients waiting, the PHC clinician can see HIV clients to reduce their waiting time. Additionally, clinician mealtimes should be staggered so that clients do not have to wait for the clinician to finish eating to see them for a consultation.

Additionally, we recommend that clinicians receive comprehensive customer care training. Nurture Africa's mission must be central to this training. Clinicians should be motivated to care for Nurture Africa's target beneficiaries: the vulnerable people of Nansana. Clinicians should also be trained to better explain the lab tests, diagnoses and drugs they are prescribing. Clients should not feel disrespected and should never feel like they are being rushed out of the clinician's office. Moreover, clients should not have to return to the clinician or another health worker to learn what their diagnosis is. Nurture Africa should track the number of clients who must return to the clinician or another health worker to clarify their diagnosis as a Key Performance Indicator (KPI).

In order to achieve a greater degree of patient privacy and send a message to clients that their time is valued by the clinician, Nurture Africa should put a sign on the door of the clinician's office that will indicate whether they are seeing a patient. This could be a simple two-sided sign hung on a string that can be flipped over. One side could be green and read "Available" and the other side could be red and read "With Patient". This simple solution should make a positive impact on the patient experience.

In agreement with Nurture Africa's lab technicians, we recommended that Nurture Africa hire another technician whose job is to collect samples for the lab and produce reports. This will help reduce the workload of the current lab technicians and should significantly reduce the waiting time for lab results.



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Proposed Patient Journey

These recommendations will effectively create a new Patient Journey Map for PHC clients at Nurture Africa (Figure 5). The most notable structural change will be moving the cashier to a later point in the journey. This effectively creates a more streamlined journey because it eliminates the convoluted process of revisiting the cashier.

The bold line indicates the overall patient journey from start to finish, while dashed lines indicate the sub-routes within the overall journey. For example, notice the elimination of redundant sub-routes from the Current Patient Journey Map (Figure 1) to the Proposed Patient Journey Map (Figure 5).

Another important aspect of the new Patient Journey Map is that the number of premature exit points is reduced by half. The only option for a premature exit in the new Patient Journey Map is if a patient leaves after the payworthy services model is explained to them by the receptionist.

Another change is the relative lengths of the waiting times, especially at the clinician and laboratory. This reflects our recommendation to

hire another lab technician, which will significantly reduce the time spent in the clinician-laboratory sub-route of the patient journey.

It is important to think about how experiences within the health center can affect clients' perceptions of Nurture Africa. When writing this report, we put ourselves in the shoes of the PHC clients.

Each client can be a source of beneficial word-of-mouth advertising if they have a good experience. However, one bad client experience can have a very large ripple effect if that client shares their complaints with friends, family members or neighbors.

Ultimately, this report is designed to provide health workers and management with information that will inform changes within Nurture Africa's health center to improve the client experience. We hope that Nurture Africa can use this report to ensure a positive experience for every PHC client in the future.

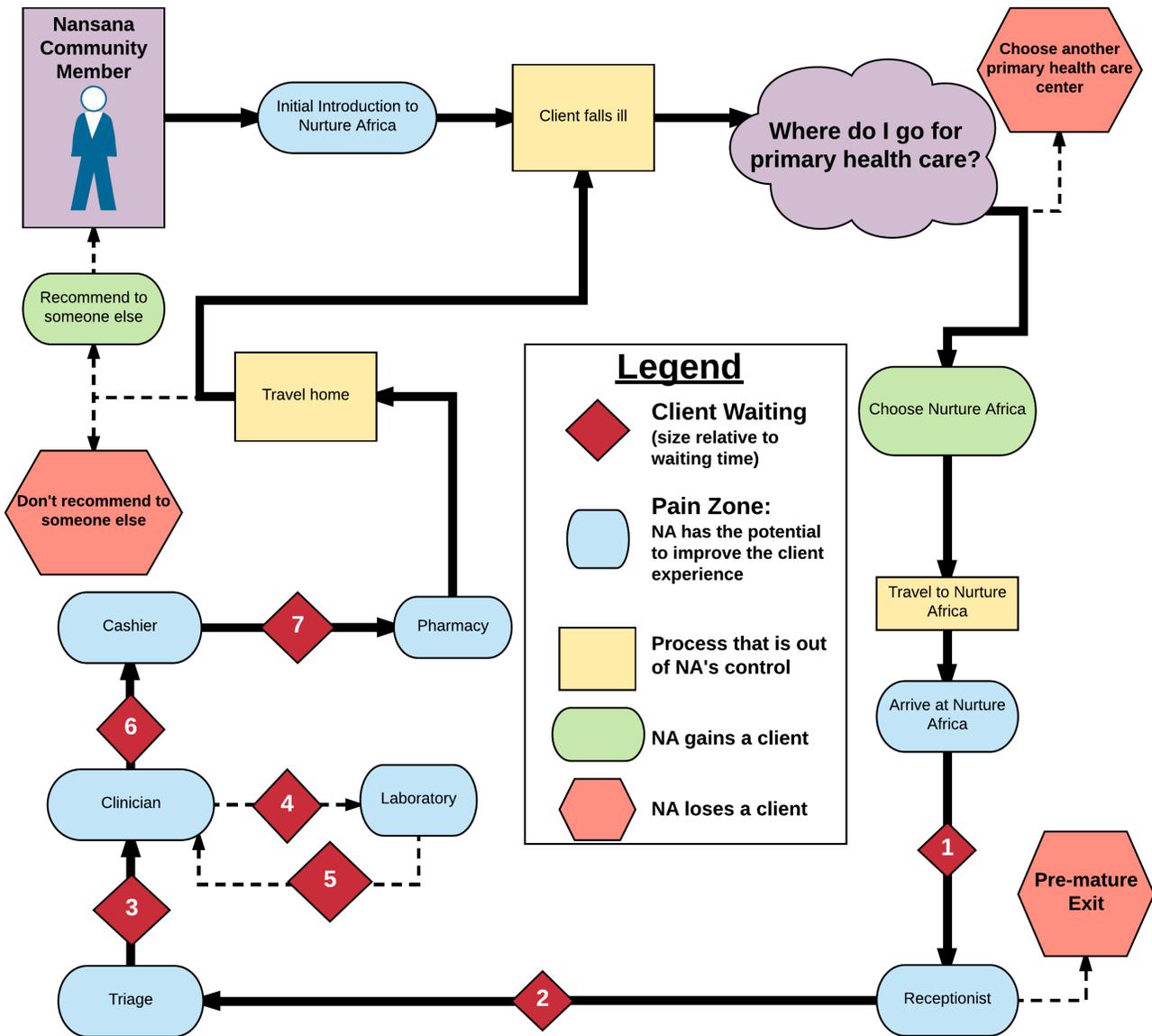


Figure 5: Proposed Nurture Africa PHC Patient Journey Map. This diagram displays the patient journey after Nurture Africa implements the recommendations given.

Recommendations Summary

Intake

Customer care training for security guards

Customer care training for receptionist

Improve professionalism of reception area

Improve signage in reception

Capitalize on educational opportunities in reception

Company phone at reception desk

Clinician & Lab

When two clinicians are on duty, one clinician prioritizes PHC clients

Customer care training for clinicians

Hire another lab technician to take blood and urine samples and prepare reports

Stagger clinician meal times so there is always one available to see clients

Cashier

Mobile Money

Consultation fee incorporated into cost of lab and drugs

Printer in cashier's office

Increased transparency about pricing/cost

Signage in reception

Brochures for Community Health Workers

Standard price sheet in each station

Availability of partial prescriptions



Appendix A: Pamphlets to be created for marketing purposes

Topic	Overview of NA	NA Health Services
Purpose	Inform the Nansana community about all of NA's services	Give an overview of health care services at NA and prices for PHC services
Contents of the pamphlet	<p>Overview of all major programs at Nurture Africa w/ photos of beneficiaries</p> <p>Mission, vision, values of Nurture Africa</p> <p>Photos of Nurture Africa property and employees</p>	<p>Phone number for receptionist</p> <p>Explanation of how NA is different/better than other health care centers nearby</p> <p>List of all health care services offered at NA</p> <p>Explanation of PHC payworthy services model</p> <p>"Menu" of PHC services and drugs</p>





Appendix B: Patient Questionnaire

Nurture Africa Patient Questionnaire

Date: _____

Time (circle): AM PM

Age: _____

Gender (circle): Male Female

Marital Status

- Single
- Married
- Widowed
- Divorced
- Other

Number of Male Dependents: _____

Number of Female Dependents: _____

Occupation/ Source of income _____

Monthly household income:

- UGX 0 – UGX 49,999
- UGX 50,000 – UGX 99,999
- UGX 100,000 – UGX 179,999
- UGX 180,000 and above



Education level

- None
- Primary
- Secondary
- Tertiary
- Other _____

How did you hear about Nurture Africa's primary healthcare?

- Friend
- Family
- Advertisement
- School
- Other _____

How long did you travel to Nurture Africa?

- Less than 30 minutes
- Between 30 minutes and 1 hour
- Greater than 1 hour

Did you pay for transport to Nurture Africa?

- Yes
- No

What mode of transport did you take to get to Nurture Africa?

- Walking
- Boda Boda
- Car or taxi
- Other _____

How long was your waiting time?

	Very Short	Short	Medium	Long	Very Long	N/A
1. Reception	<input type="checkbox"/>					
2. Cashier – paying for consultation	<input type="checkbox"/>					
3. Triage	<input type="checkbox"/>					
4. Clinician – initial consultation	<input type="checkbox"/>					
5. Cashier – paying for lab fees	<input type="checkbox"/>					
6. Lab	<input type="checkbox"/>					
7. Clinician – waiting for lab results	<input type="checkbox"/>					
8. Cashier – paying for drugs	<input type="checkbox"/>					
9. Pharmacy	<input type="checkbox"/>					



Assessment of Primary Health Care Services

Please check the box that best matches your level of agreement with the following statements.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	N/A
1. The Nurture Africa health clinic is easy to find.	<input type="checkbox"/>					
2. The Nurture Africa health clinic has convenient operating hours.	<input type="checkbox"/>					
3. Nurture Africa's health clinic facilities are clean.	<input type="checkbox"/>					
4. The receptionists are friendly and treat me with respect.	<input type="checkbox"/>					
5. The nurses are friendly and treat me with respect.	<input type="checkbox"/>					
6. The clinician spent an adequate amount of time attending to me.	<input type="checkbox"/>					
7. The clinicians are friendly and treat me with respect.	<input type="checkbox"/>					
8. The clinicians helped me understand my medical condition.	<input type="checkbox"/>					





	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	N/A
9. The laboratory technicians are friendly and treat me with respect.	<input type="checkbox"/>					
10. The cashiers are friendly and treat me with respect.	<input type="checkbox"/>					
11. The pharmacists are friendly and treat me with respect.	<input type="checkbox"/>					
12. The drugs I need are usually in stock at the Nurture Africa pharmacy.	<input type="checkbox"/>					
13. The Nurture Africa staff provide me with good medical care.	<input type="checkbox"/>					
14. The staff seemed to work well with one another.	<input type="checkbox"/>					
15. My patient privacy is respected at Nurture Africa	<input type="checkbox"/>					
16. I know approximately how much I am going to have to pay before I come to Nurture Africa.	<input type="checkbox"/>					
17. The staff effectively helped me understand the costs of all the health services (consultation, lab, drugs etc).	<input type="checkbox"/>					
18. I pay a fair price for the services I receive at Nurture Africa.	<input type="checkbox"/>					
19. I know where to go in the health clinic for different services (clinician, lab, pharmacy etc).	<input type="checkbox"/>					
20. Any complaints I had were addressed.	<input type="checkbox"/>					
21. I am satisfied with the care I received at the Nurture Africa health center.	<input type="checkbox"/>					
22. I would recommend the Nurture Africa health clinic to a friend or family member.	<input type="checkbox"/>					





Do you have any suggestions or other comments for Nurture Africa?
