



TRANSITION ANALYSIS REPORT

FOR NURTURE AFRICA BOARD AND MANAGEMENT

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Executive Summary

Nurture Africa aims to move from a donation-dependent model to more of a social enterprise business model with diversified revenue streams. In this transition process, Nurture Africa is also interested in improving the patient experience. This will allow Nurture Africa to retain its current patient base and attract more paying clients. After participating in the online Global Social Benefit Institute program in 2016, the organization implemented a cross-subsidy payment model for primary health care (PHC) services (hereafter referred to as “payworthy services”).

The objectives of our research were twofold: investigate the degree of success of the payworthy services model thus far, and generate and articulate strategies to improve the client experience, increase the number of PHC clients and ensure that the target beneficiaries are continuing to be served.

We collected demographic information and conducted market research in order to understand the motivations and desires of Nurture Africa’s PHC client base. From this we discovered that the factors most important to PHC clients when choosing a clinic are the quality and cost of services, as well as the attitude of health workers. In regards to the services offered at Nurture Africa, PHC clients desire a reduction in the cost of services, an increase in the types of services offered, and more education about

the new payworthy services model and the various services offered. Many former PHC clients indicated that they stopped coming to Nurture Africa when the payworthy services model was implemented because they could not afford the newly imposed fees.

To increase the number of PHC clients and ensure the success of the cross-subsidy payment model, Nurture Africa must attract both vulnerable Silver clients and affluent Gold and Platinum clients through the use of greater marketing and community health workers.

We also analyzed Nurture Africa’s strengths and weaknesses, as well as opportunities and threats relating to the success of the payworthy services model. As a result, we recommend Nurture Africa clarify its mission, improve staff communication and professionalism, and improve hygiene standards in the health center. Opportunities available to Nurture Africa also include increased employee training, improved signage within the community directing clients to the clinic and increased marketing to current and prospective beneficiaries.

The data base for this report is the same for the complementary Patient Journey Map. Therefore, if read together there will be some redundancy in reporting. This report is primarily targeted towards Nurture Africa board members and management.



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Introduction

Two-thirds of families in peri-urban areas of Uganda are at risk of falling into extreme poverty. A majority of these vulnerable families lack access to basic health and financial services, as well as quality education. Nurture Africa seeks to shift this unjust equilibrium by addressing these challenges simultaneously.

The enterprise provides economical, high quality health care, microfinance and vocational services under one roof. This holistic approach promotes human dignity and empowers vulnerable families to increase their standard of living. Moreover, Nurture Africa serves affluent and poor families alike. This unique community-based approach results in a significant social impact for those suffering through poverty in Nansana. Members of the Nansana community have many options when choosing where to access PHC services, but those who are vulnerable unfortunately lack options that are both high quality and affordable.

Historically, Nurture Africa has relied on donor support for funding. The inconsistent nature of donations from year to year has raised the need for more consistent income streams in order to sustain current operations. As a result, Nurture Africa is actively seeking to move from a donation-dependent business model toward a social enterprise business model with diversified revenue streams.

Nurture Africa's first revenue-generating initiative is the PHC services offered in the health center. Until December 2016, Nurture Africa provided free PHC services to all clients. A cross-subsidy payment model for PHC services was proposed to ensure sustainable growth and was piloted in December 2016. However, PHC attendance data from December 2016 - May 2017 revealed that the implementation of the payworthy services model resulted in a significant reduction in the number of clients accessing Nurture Africa's PHC services (Figure 1). As a result, the enterprise now hopes to improve the quality of its PHC services in order maintain its current patient base, attract more paying clients and ensure the success of the cross-subsidy model.

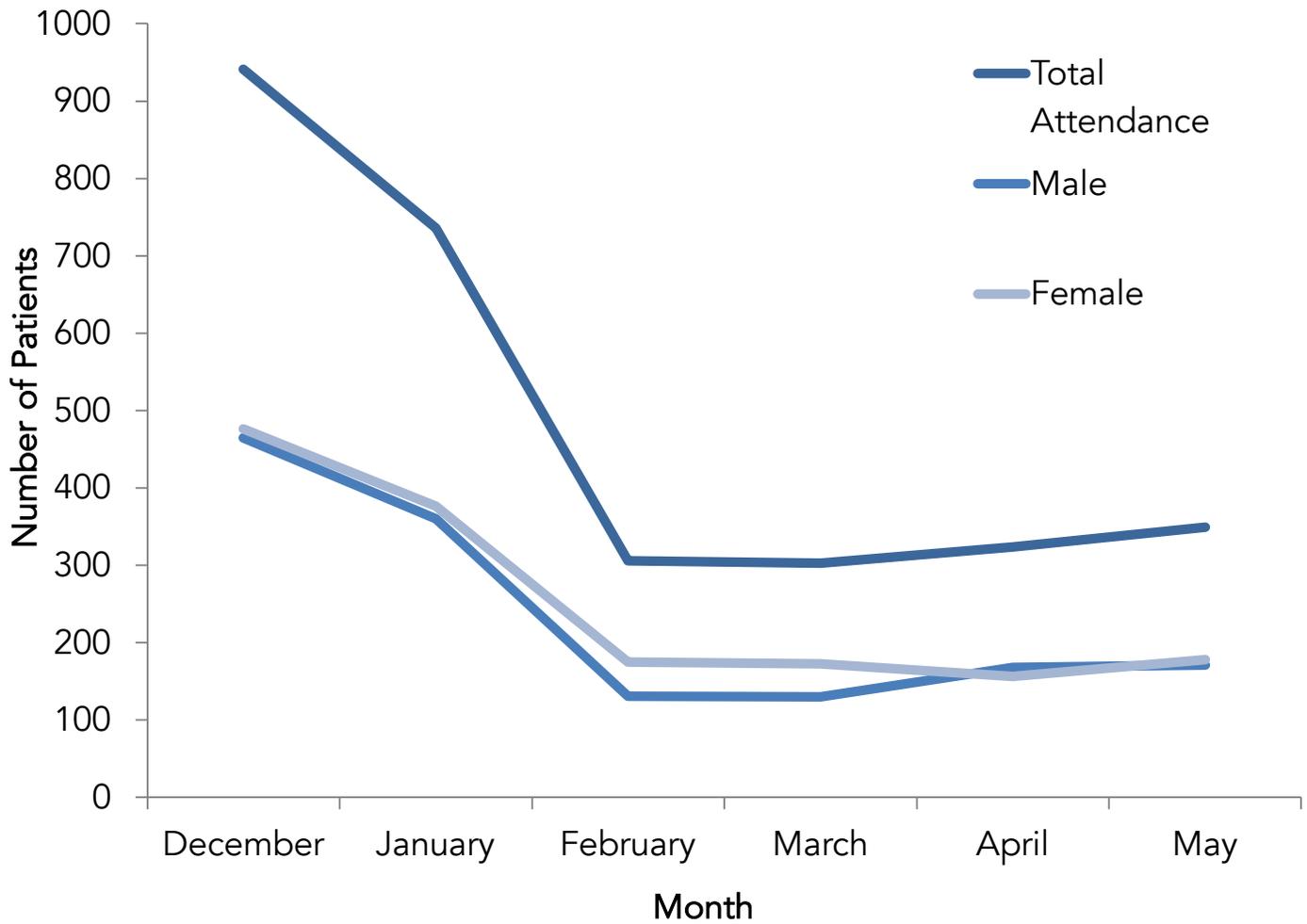


Figure 1. Number of PHC clients from December 2016 - May 2017. Data collected from Nurture Africa’s private practice software (PPS). The pilot program for the payworthy services model was launched in December 2016. Payworthy services was implemented for all clients on February 1, 2017.



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Market Research

To ensure the profitability of the cross-subsidy payment model, it is essential that Nurture Africa understand who its target clients are. The motivations and desires of the PHC client base are important for the organization to consider, especially as it moves toward less donor dependence. Our research examined client demographics such as age, gender, marital status, education level and number of dependents. Additionally, we explored how clients hear about Nurture Africa, if they know where Nurture Africa is, how long they travel to Nurture Africa and by what method, as well as what PHC factors are important to them and why they choose to attend Nurture Africa instead of another clinic. We also asked clients what they believed could be improved about the PHC services, as well as what other services they would like to see offered at Nurture Africa. By understanding these determinants, Nurture Africa has the opportunity to better tailor its PHC services to address client needs and wants, furthering and ensuring the success of the model.

Our data was collected from three main stakeholder groups: current patients, former patients and clinic staff. Among current patients we administered 72 written surveys, conducted 64

structured interviews and 4 focus groups with 35 total participants. Among former patients we conducted 12 semi-structured, in-home interviews and 3 focus groups with 22 total participants. We also conducted 12 informal interviews with Nurture Africa staff.

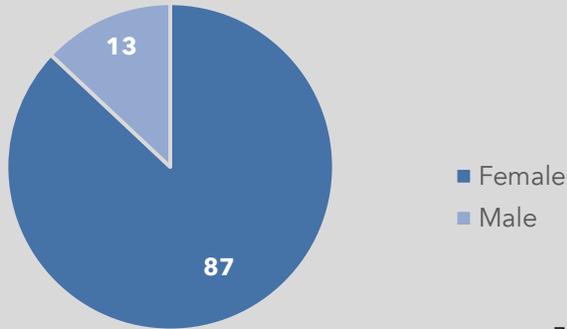
CURRENT PATIENTS

To understand the demographics of the current clients accessing PHC at Nurture Africa, we collected data on clients' age, gender, number of dependents, marital status and education level. However, the data does not necessarily reflect the demographics of the actual patients. Instead, it reflects who filled out the survey. For example, if a mother brought her child in for PHC at Nurture Africa, our data represents the mother's information rather than the child's. The average age of survey respondents was 34 years old. The average number of dependents that each respondent reported was 2.3 males and 2.1 females. The following figures illustrate other demographic measures reported by the respondents.



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Figure 2. Gender distribution of PHC clients



This demographic data, along with our clinic observations, reveal that the most common type of client accessing Nurture Africa’s PHC services is likely a married mother with some level of formal education who is bringing her child in for care (Figures 2-4). Additionally, the results of an exit survey of PHC clients indicated that friends, family members and community health workers are the primary sources of new client referral to Nurture Africa’s PHC services (Figure 5).

Figure 3. Marital status

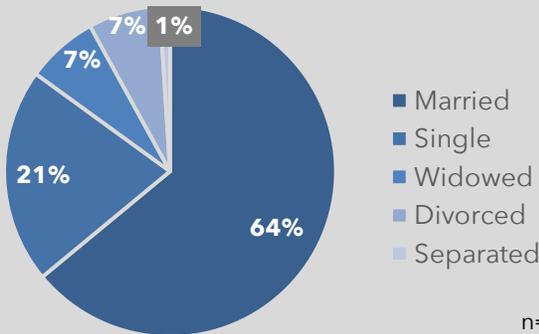


Figure 5. Introduction to Nurture Africa

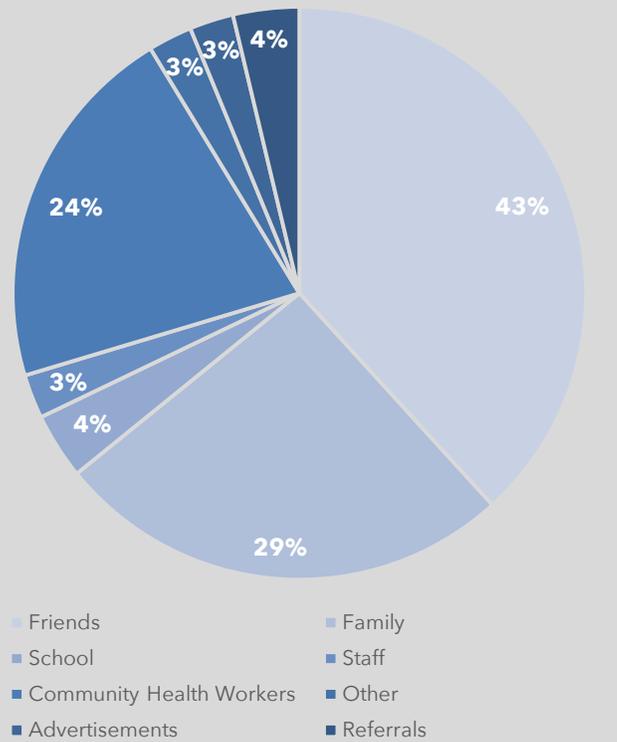
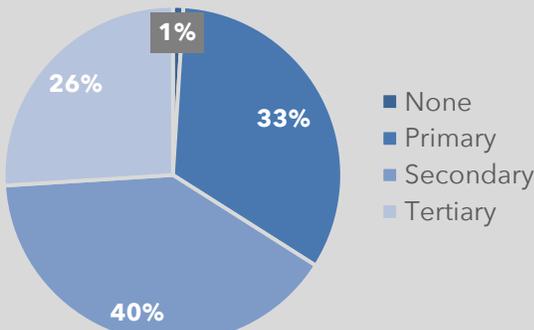


Figure 4. Education level



Data from Nurture Africa Patient Questionnaire (Appendix B). Questionnaires were completed by PHC clients with the help of a translator after they received PHC services.

“How did you hear about Nurture Africa’s primary healthcare?” Data from Nurture Africa Patient Questionnaire (Appendix B).



As 60% of clients hear about Nurture Africa from friends or family members, word-of-mouth advertising is significant. Through qualitative interviews and conversations with clients, it became evident that there are misconceptions and false information within the community regarding PHC services at Nurture Africa and the new payworthy services model. For example, many people still believe that Nurture Africa only treats children or only treats HIV clients. Therefore, it is important to communicate accurate information to PHC clients so that they can pass it on to other members of the community. To combat the spread of incorrect information within the Nansana community, we recommend the creation and distribution of educational pamphlets that include information about Nurture Africa's health services (Appendix A).

Another important factor is whether or not clients and community members know where the Nurture Africa clinic is geographically, and if they think it is easy to find. The Nurture Africa property is far off the main road and without any signage directing them to the clinic, it could prove difficult for new clients to locate. The results from our survey indicate that 89% of current clients agreed with the statement that Nurture Africa is easy to find. It is possible that this value may be biased as the data comes from current clients that have been coming to Nurture Africa consistently and therefore know the location well. Additionally,

from interviews and focus group discussions, many clients expressed that the location of Nurture Africa is not well known within the community and that when telling boda boda drivers where they want to go, they say Ashinaga school rather than Nurture Africa, as Ashinaga is more well known. Because Nurture Africa is far off the main road in Nansana, it is important that signage directing clients to the facility be improved.

Management currently has plans to construct a sign on the main road, despite the road construction. We also suggest that a sign be placed at the intersection of the side roads near Nurture Africa so that clients know they must continue down the hill to reach the clinic. Current signage outside the Nurture Africa gate has outdated contact information. We suggest that these signs be updated with the most correct contact information. Signage should also indicate the many services offered at Nurture Africa. These simple approaches will not only improve the community awareness of Nurture Africa's physical location within Nansana, but also awareness of the many programs offered by Nurture Africa. One of the most critical elements of understanding one's client base is awareness of what factors are important to clients and how one's organization compares to its competitors. The people of Nansana have many options for their medical care. They can go to a private clinic, a government clinic, or a drug shop. Private clinics typically offer



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more services but at a higher price, while government clinics are free but often have long waiting times and poorer quality of care. Drug shops are stores in which people can buy drugs without having to consult with a doctor or clinician, but the drugs are often of lower quality or counterfeit. To understand client motivations, we asked clients what factors are most important to them when choosing a health facility (Table 1).

In order to increase the number of PHC clients attending Nurture Africa, the organization should seek to address these factors in the PHC clinic keep them in mind when communicating with the community. An encouraging finding from our research is that the majority of current PHC clients had positive responses when asked about the aforementioned factors in the context of Nurture Africa. For example, 96% of current clients agreed with the statement that the Nurture Africa health clinic is clean. 78% of clients agreed that the Nurture Africa health clinic has convenient operating hours. Additionally, from our interviews with current clients, most clients expressed that, compared to other clinics, Nurture Africa has shorter wait times, higher quality drugs that are more frequently available, and staff that are more friendly and approachable. 95% of PHC clients said they were satisfied with the care they received at the Nurture Africa health center and 96% of clients said they would recommend the Nurture Africa PHC clinic to a friend or family member. While these responses indicate that

Table 1. Ranked list of important factors PHC clients consider when choosing a medical facility

- | |
|--|
| 1. Care given to patients |
| 2. Quality of services |
| 3. Cost of services |
| 4. Attitude of health workers |
| 5. Environment of facility / cleanliness |
| 6. Total time spent in clinic |
| 7. Specialist services |
| 8. Quality of drugs |
| 9. Follow-up appointments |

current clients have a positive view of Nurture Africa, it is essential that this view be spread within the community so that target clients recognize and associate the factors they value when choosing a health center with the Nurture Africa health center.

To understand the reach of Nurture Africa’s client base within the community, we assessed how long it takes clients to travel to Nurture Africa. As indicated in Figure 6, the majority of clients are traveling between 30 minutes to 1 hour to reach Nurture Africa.

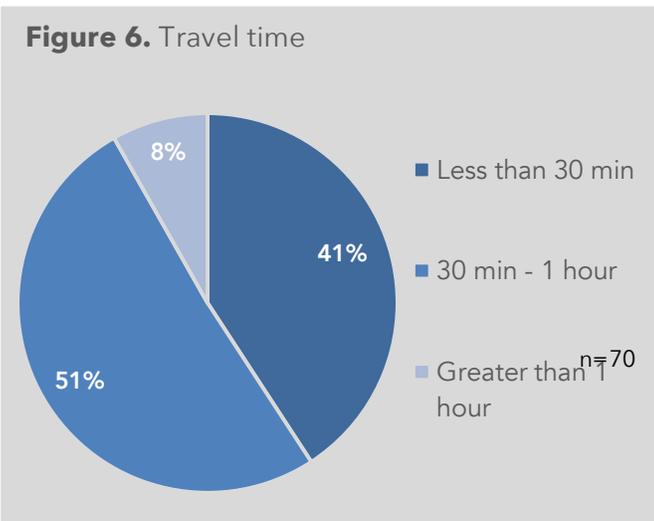


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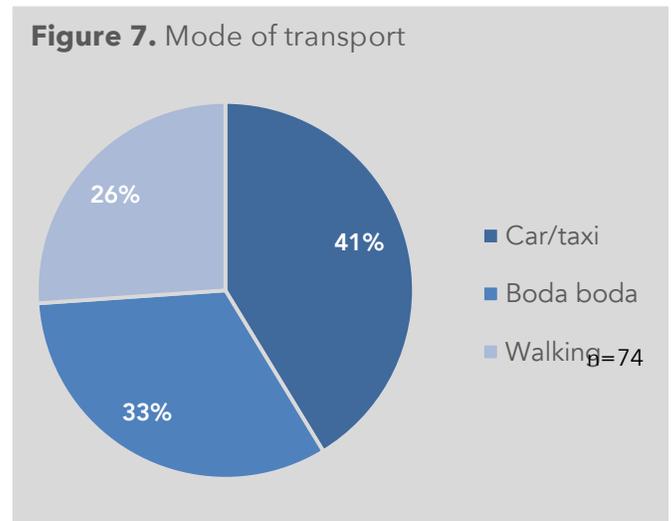


Given the other clinics and drug shops, the strength of Nurture Africa’s reputation is indicated by many clients’ willingness to travel a longer distance to receive care at Nurture Africa instead of going to a facility closer to their home. Additionally, 36% of clients indicated taking a boda boda to Nurture Africa, 37% reported taking a car/taxi and the remaining 27% indicated walking (Figure 7).

When asked whether or not they paid for transport to Nurture Africa, 70% of clients reported that they did pay for transport. This value is significant because many clients expressed that it can become difficult to afford both the money for transport as well as the cost of medical services. For some, once they pay for transport and the consultation fee they cannot afford to pay for the cost of drugs and lab tests. One opportunity for Nurture Africa to reduce both the physical and time costs associated with clients traveling to Nurture Africa is by shuttling clients who have received primary health care from the Nurture Africa property back to the main road, and perhaps a travel subsidy for the more vulnerable.



“What mode of transport did you take to get to Nurture Africa?” Data from Nurture Africa Patient Questionnaire (Appendix B).



“How long did you travel to Nurture Africa?” Data from Nurture Africa Patient Questionnaire (Appendix B).





Although clients were generally positive about the services and their experiences at Nurture Africa, many ideas and improvements were proposed by clients. Table 2 illustrates the most commonly suggested improvements by PHC clients.

Table 2: Suggested improvements to Nurture Africa PHC services

1. Reduction in cost of services
2. Increase in services offered (X-ray, scan, ultrasound, maternity care, 24-hour care)
3. Increased client education
4. Better signage
5. Better customer care

Due to financial constraints, Nurture Africa may not be able to reduce the cost of services or expand the services offered, notwithstanding the new maternity center under construction. However, it is worth noting that regardless of financial resources, there remains a desire within the community for expanded services.

In the meantime, we recommend increased client education regarding the new PHC payworthy services model and the various services offered by Nurture Africa. This educational material could include pamphlets about the PHC payment system, as well as information regarding Nurture Africa’s other health services, vocational training programs and sustainable livelihood loans (Appendix A). Additionally, we recommend putting new signage in both the reception waiting area and around the health center. Signs in the reception area should explain the payment system and list the services offered, while signs around the clinic should be larger and direct clients to the various waiting rooms and offices. Moreover, we recommend customer care training for all clinic staff to ensure that all clients are treated with respect and provided the highest quality of care possible.

FORMER PATIENTS

The vast majority of PHC clients who have stopped coming to Nurture Africa since the implementation of the payworthy services model fall within the Silver category. Before February 2017, these clients were able to come to Nurture Africa for free, high quality PHC services. These patients are considered to be vulnerable but within the new system are asked to pay 3000 UGX for consultation and 25% of the cost of lab and drug fees. While these prices are far less than other private clinics in Nansana, most Silver



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clients still cannot afford to pay a consultation fee, lab fees and drug costs. We interviewed a number of former patients, who all indicated that they stopped coming to Nurture Africa because they could not afford it. They explicitly stated that they did not stop coming because of the quality of the care or services offered. Many of the former Nurture Africa clients indicated that since the payworthy services model was implemented at Nurture Africa they now go to the free government clinics to see clinicians. Additionally, some former clients stated that when they fall ill, they simply go to drug shops and buy the drugs they think they needed. All former patients indicated that they would return to Nurture Africa if the payment system was removed or the costs were reduced.

It is our understanding that Silver clients make up the bulk of Nurture Africa's target beneficiaries. Silver clients come from vulnerable families, but do not suffer from HIV/AIDS. If Nurture Africa reaffirms its mission of empowering vulnerable families, management should develop a solution to make its PHC services accessible for Silver clients. Development of this solution should follow a patient-centric approach. More research must be conducted in order to identify the exact needs and budgets of Silver clients.

TARGET PATIENTS

While Nurture Africa's primary (target) beneficiaries are vulnerable families in Nansana, the viability of the payworthy services model depends on attracting affluent clients who can afford to pay higher prices. It is likely that these affluent clients are currently attending other private clinics in Nansana. This requires Nurture Africa to compete for clients in this market.

During our time in Nansana we had the opportunity to visit two private medical clinics: Diva Medical Center and Sebbi Medical Center. Through these visits we gained insight into the operations and services of the private clinics that Nurture Africa's prospective Gold and Platinum clients may be currently attending. Both Diva and Sebbi had expanded services in comparison to Nurture Africa, including dental units, surgery units, maternity wards, in-patient beds, X-rays and scans.

Currently, there are very few Platinum clients coming to Nurture Africa for PHC services. In focus groups, respondents stated that paying extra to skip the line "seemed like corruption." Less than 10% of clients interviewed stated that they would pay extra for a shorter wait time. Even though clients spend over two hours in the clinic on average, 71% of respondents to our survey said the wait times were short overall. Affluent clients must have a compelling reason to come to



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Nurture Africa and pay a premium price. Fast-tracking to the clinician has not proved compelling enough to attract a great deal of Platinum clients. However, we recommend that Nurture Africa conduct further research in the more affluent communities in Nansana to learn for what services and/or level of care they would pay a premium. In the meantime, we suggest that the Nurture Africa community health workers target more affluent neighborhoods and distribute pamphlets detailing the various services offered and their associated costs. This marketing approach will help raise awareness within the neighboring communities of the PHC services offered at Nurture Africa.

As indicated in the previous section, the majority of clients who stopped attending Nurture Africa when the payworthy services model was implemented were categorized as Silver. To achieve its mission of serving vulnerable families, Nurture Africa must also target new Silver clients and re-target former Silver clients. While the majority of former clients stopped coming to Nurture Africa because they simply couldn't afford it, some former clients stopped coming because

there was not adequate education about the payment system prior to its implementation. Also, misinformation was spread throughout the community. We recommend that Nurture Africa re-target Silver clients that have become "inactive," as well as target new Silver clients through community health workers. It is important that community health workers be trained in how to respond to client questions about why this payment system was implemented. Additionally, this campaign should involve the distribution of pamphlets that outline the services offered at Nurture Africa, as well as the associated costs.

Finally, it is imperative that Nurture Africa develop an accurate client classification system to ensure that clients are correctly classified based on their vulnerability status. Currently, all new clients are classified as Gold regardless of their true vulnerability status. This means that some clients are paying Gold prices, but in reality should be classified as Silver. To ensure that clients are classified correctly and are paying according to their vulnerability, we recommend that Nurture Africa develop an assessment tool.



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SWOT Analysis

Nurture Africa has provided high-quality health care services for nearly a decade and a half. The quality of the service is still high, but there are some key areas of improvement that are within Nurture Africa’s control.

Table 3. Overview of SWOT analysis	
<p>STRENGTHS</p> <ol style="list-style-type: none"> 1. Skilled health workers 2. Large HIV program 3. Large facility, beautiful property 4. Availability of drugs 5. Reputation 	<p>WEAKNESSES</p> <ol style="list-style-type: none"> 1. Mission drift 2. Less than optimal communication 3. Professionalism not emphasized 4. Minimal hygiene for a health center 5. Far from the main road 6. Low employee morale
<p>OPPORTUNITIES</p> <ol style="list-style-type: none"> 1. Employee training / capacity-building 2. Marketing to beneficiaries of other programs 3. Maternity ward opening soon 4. New mini-clinic on main road 	<p>THREATS</p> <ol style="list-style-type: none"> 1. Competitors 2. Misinformation / miscommunication between all stakeholders





STRENGTHS

The health center at Nurture Africa benefits from a number of valuable assets. These include, but are not limited to: a large facility with room for growth, skilled health workers who have experience treating children, a large pharmacy that usually has most drugs in stock, a good reputation among beneficiaries and a wide variety of free programs offered to the Nansana community. Management should make it a priority to maintain these assets.

WEAKNESSES

Mission. Through conversations with Nurture Africa staff members and seven weeks of observations in the clinic, we identified four key areas of weakness in the health center. Foremost among these concerns is that Nurture Africa does not have a clear mission statement (or vision). We have discovered numerous iterations of Nurture Africa's mission statement on various marketing materials, GSBI program materials and the Nurture Africa website. Nurture Africa's Strategic Planning Committee must make it a priority to clarify a mission statement that can be used consistently for at least the next five to ten years. An example mission statement for the PHC program could read: "Enable vulnerable families to access high quality primary healthcare services." A strong mission statement can act as a motivating force for the entire organization.

Nurture Africa should strive to become a mission-driven organization in which every employee knows the mission statement and what it means to them. The mission statement should be displayed in prominent locations throughout the health center to remind employees of its importance and identify Nurture Africa to clients as a company with strong values.

Communication. Another area for growth in the health center is communication between health workers. There are three levels of communication we identified that must be addressed. The highest level of communication is between and among the entire health center staff during meetings. These meetings only happened once per month during our time in Nansana. In between the two staff meetings that occurred while we were there, we noticed that many action points that were brought up in the previous meeting were not addressed a month later. Moreover, timely items often could not be acted on from one meeting to the next because the meetings were too far apart. In interviews with Nurture Africa health workers, we learned that they would prefer to have their meetings more often, perhaps every two weeks. Increasing the frequency of meetings will have a number of benefits. The amount of time spent in each meeting will be reduced because less information will have to be covered in each one. Additionally, health workers, especially



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management, will be held more accountable for acting on points that were brought up in previous meetings. An important point to note about health center meetings is that they occur during business hours. This means that many health workers must leave the meetings to attend to clients. We recommend that health center meetings be held after business hours or on Saturdays. We learned that Diva Medical Center holds their meetings on Saturdays, and provides food for the employees.

Professionalism. Another area for improvement in the Nurture Africa health center is in the realm of professionalism. Most Nurture Africa health workers do not wear uniforms, and none of them wear name tags. At both Diva Medical Center and Sebbi Medical Center, all health workers wear clean, matching uniforms. Clients at Nurture Africa complained that they sometimes did not know who the different health workers were because they did not wear uniforms. Health workers complained in monthly meetings that they did not have clean uniforms because they did not want to take them home to wash, as they were made dirty by working in the health center. Sebbi and Diva hire employees to wash linens and uniforms. Nurture Africa employees requested that management invest in a washing machine or hire employees specifically to wash uniforms and linens. Former clients who came to our focus groups recommended that health workers wear name tags.

Hygiene. Hygiene is of utmost importance in any health center, and should be made a priority for all health workers at Nurture Africa. Clinicians complained that there were not enough linens to cover the beds in the offices, nor was there any alcohol or cleaning solution to wipe the beds down in between patients. Irish volunteers who worked in the health center echoed these concerns, as well as noting that there was not soap or hand sanitizer in each clinician's office. These volunteers even said that they would be willing to donate soap and hand sanitizer. Sometimes the main corridor in the center of the health center gets dirty throughout the day. Management should ensure that the sanitation workers on staff are periodically checking the corridor and cleaning up any messes. This could be written into the sanitation workers' job description or as a standard operating procedure.

Employee Morale. Another potential threat to the success of Nurture Africa's PHC program is employee morale. In speaking with Nurture Africa health workers, we observed that many of them seemed unmotivated in their roles. Factors such as low pay and understaffing contributed to the low levels of staff morale in the health center. Low employee morale leads to poor customer service. This is a significant threat because it could thwart any of Nurture Africa's attempts to train health workers in customer service. One of the most frequent requests we heard when interviewing staff was that they would like to have more



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training and capacity building opportunities. Health workers were especially keen on this idea. They need continuous training to maintain their skills and learn new ones. We recommend that in addition to providing health workers with training opportunities, Nurture Africa should put in place employee recognition programs or plan staff events to foster community and improve staff morale.

Location. The location of Nurture Africa is sometimes a detriment to the organization because it is off the main road, and there is no sign post indicating that there is a health center down the side road. However, there is an opportunity to improve community awareness of the organization by building a signpost, or column with signage on it, on the main road near the municipal building. The benefits of building this signpost or column may be twofold. For one, Nurture Africa will be more visible from the main road, which will attract more clients. Nurture Africa can also advertise their variety of services on the sign. Second, if Nurture Africa builds a column with multiple spaces for signs, they will be able to generate income by renting additional spaces to other businesses.

OPPORTUNITIES

There are a number of exciting opportunities for Nurture Africa to improve its operations.

Employee training. Many employees expressed their desire to participate in capacity-building or continuing education programs outside of work. Nurture Africa can reduce employee turnover, improve morale and gain a greater level of employee expertise by funding training programs.

Intra-program marketing. Nurture Africa serves members of the Nansana community in a wide variety of ways. Thus, there are thousands of locals who have benefited from the organization through one or more of its programs. Nurture Africa should utilize this large pool of beneficiaries to disseminate information about the payworthy services model. This will help combat the still pervasive misconceptions about payworthy services.

Maternity ward. The upcoming opening of the maternity ward presents another exciting opportunity for Nurture Africa. When the maternity ward is opened, Nurture Africa must stay open 24/7. This was the second most common request in all of our interviews and focus groups, behind reducing the cost of services. Many clients who live very close to Nurture Africa expressed their need for a health center close by





where they could go in case of an emergency at night.

Expansion. Nurture Africa's expansion to another location will also provide the organization with an opportunity to attract more paying clients. The "mini-clinic" on the main road that has been proposed should prove effective in generating more brand recognition and expanding Nurture Africa's customer base.

THREATS

Competition. Nurture Africa faces a number of threats. For one, Sebbi Medical Center is currently expanding to become a much larger hospital. This could be an issue because Sebbi may divert clients from Nurture Africa as it expands its capacity. Additionally, there is the possibility that Nurture Africa may lose clients because it is located a significant distance off the main road. Medical centers such as Sebbi and Diva are located on or much closer to the main road and are therefore more visible to clients. Clients would not happen upon the Nurture Africa property unless they were specifically looking for it. Without signage on the main road or at the intersection of the side roads near Nurture Africa, clients knowing about and finding Nurture Africa remains a persistent threat to the organization's success.

Miscommunication. One of the most significant threats to the success of Nurture Africa's payworthy services model remains the high degree of miscommunication among all involved stakeholders. Initial miscommunication regarding the payworthy services has likely contributed to the high degrees of misinformation that is present in the community. As word of mouth marketing is significant, this misinformation spreads quickly throughout the community and can be difficult to remediate once dissipated. Community perceptions that Nurture Africa treats only HIV clients or treats only children pose a significant threat to the success of the cross subsidy payment model. It is possible that Nurture Africa is losing out on a larger client base because of this misinformation. Moreover, miscommunications regarding the prices of drugs and lab fees within the clinic pose an additional threat that can lead to the premature exit of clients.



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Possible Strategy Options

After synthesizing our market research with information that we gleaned from Nurture Africa's employees, we have developed four possible strategy options for the organization to consider as it moves into 2018 and creates its next long-term strategic plan.

Return to free PHC services. The implementation of the payworthy services model in the PHC unit of the Nurture Africa health center resulted in a stark reduction in the number of beneficiaries accessing PHC services. By returning to a free service model, Nurture Africa could regain former beneficiaries and more effectively fulfill its mission.

Limit PHC service to a specific niche. As Nurture Africa opens the doors of its maternity ward in the spring of 2018, it will be serving more mothers and children than ever before. The organization could retake a share of the PHC market in Nansana by focusing its efforts solely on mothers and children. The infrastructure of the health center supports this move already: the paintings throughout the health center appeal to children. By marketing itself as a family-oriented health center, Nurture Africa may be able to benefit PHC

clients through programs other than those provided currently by PHC. Furthermore, this unique niche may attract clients away from other private health centers such as Diva and Sebbi.

Start a community health insurance initiative.

This option was discussed by one of the clinicians during our final meeting with the health center staff in August. Members of the community could pay a small, recurring fee to be able to access PHC services at Nurture Africa. This would generate revenue for the organization, and would not require members of the community to pay large sums of money at one time when they or their children are sick.

Separate services on the main road. We understand that there are plans to build a "mini-clinic" on the main road. It may be effective to provide paid services at this clinic, and refer clients seeking free care to the original health center off the main road. A premium service would be provided at the "mini-clinic" to those who can pay. This would subsidize the costs of providing free care to clients at the main health center



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Conclusion

While the cross-subsidy payment model has had limited success thus far and PHC daily attendance remains low, quality of care and patient satisfaction at Nurture Africa remain very high. To improve the success of the payworthy services model and rebrand itself, Nurture Africa must invest in active marketing strategies that correct misinformation within the community and educate target clients about the services it offers. While the opening of the maternity ward and the beginning of 24 hour care is likely to attract a significant number of new clients to Nurture Africa, it is still essential that both former and potential clients be well informed by community health workers.

With proper marketing and implementation of recommended improvements, we believe that organizational operations can be greatly improved and that the transition to a social enterprise business model can take a significant step forward.

Organizational financial sustainability will likely not be achieved solely through revenues generated by the PHC clinic alone. However, in conjunction with other proposed income generating activities, such as the vocational training shops, we believe Nurture Africa can draw nearer to its goal of financial sustainability.

Despite setbacks, Nurture Africa remains a resilient and dynamic organization, actively working to improve and maximize the positive impact for its beneficiaries.



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Table 4: Summary of Recommendations

Clarify mission statement

- Teach to employees and display in health center

Improve communication

- Among Nurture Africa employees
- Between Nurture Africa and clients

Encourage professionalism

- Provide uniforms and name tags
- Wash uniforms for health workers

Improve hygiene

- Clean linens or cleaning solution for clinicians' offices
- Provide more soap / hand sanitizer for clients and health workers

Increased marketing to beneficiaries

- Provide educational pamphlets (Appendix A)
- Send Community Health Workers to affluent communities to attract paying clients

Conduct more market research

- Identify products / services that would attract more Gold and Platinum clients
- Determine how much money Silver clients can afford to pay for PHC services

Improve employee morale

- Fund more external training opportunities
- Recognize employee accomplishment & hard work





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	<ul style="list-style-type: none"> - Overview of all major programs at Nurture Africa w/ photos of beneficiaries - Mission, vision, values of Nurture Africa - Photos of Nurture Africa property and employees 	<ul style="list-style-type: none"> - Phone number for receptionist - Explanation of how NA is different/better than other health care centers nearby - List of all health care services offered at NA - Explanation of PHC payment system - "Menu" of PHC services and drugs - Give clients an idea of how much they will have to pay for PHC services





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 _____



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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



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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"/>					



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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.
21. I am satisfied with the care I received at the Nurture Africa health center.
22. I would recommend the Nurture Africa health clinic to a friend or family member.

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



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