



REPUBLIC OF NAMIBIA
MINISTRY OF HEALTH
AND SOCIAL SERVICES

STANDARD OPERATING PROCEDURE FOR **PATIENT/ CLIENT EXPERIENCE AND SATISFACTION** ASSESSMENT

APRIL 2025



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FOREWORD

Patient satisfaction is a critical indicator of healthcare quality and service effectiveness. In our commitment to enhancing healthcare in Namibia, the Ministry of Health and Social Services (MoHSS) has developed this Standard Operating Procedure (SOP) to guide the assessment of patient/client experiences and satisfaction. This document provides clear, actionable guidelines to improve patient experiences, ensuring that services are delivered with respect, empathy, and efficiency. By prioritizing patient-centered care, we aim to improve the overall experience and ensure that each patient feels valued, heard, and well cared for.

Rooted in the 2022 National Namibian Quality Management Policy and Strategic (NQPS) Plan, this SOP aligns with Strategic Objective 2: Ensure client-centered care and empowerment of consumers. Active patient participation in their care improves effectiveness and satisfaction, as informed and dignified clients involved in treatment decisions are more likely to adhere to their plans, leading to better health outcomes. Patient engagement also requires empowering individuals, especially those with chronic illnesses or disabilities, with information and tools for self-care to reduce unnecessary services and costs. Community participation is crucial, and initiatives like health facility advisory committees, which include community members as stakeholders, need to be strengthened or established.

This SOP aligns with national Healthcare Facility Quality Standards, emphasizing safety, timeliness, effectiveness, affordability, people-centeredness, friendliness, and accessibility. Healthcare facilities must establish robust client feedback systems to capture patient complaints and suggestions, forming a basis for continuous quality improvement (QI). There is also a need to continuously raise awareness of patient rights and responsibilities, as highlighted in the Namibian Patient Charter, so that patients are informed and engaged in their care decisions. This SOP details responsibilities at various healthcare management levels, patient satisfaction strategies, monitoring and evaluation mechanisms, and guidelines for addressing feedback and complaints.

I would like to thank all stakeholders who participated in the development of this SOP and urge all healthcare facilities to use this SOP and patient satisfaction assessment tools regularly, addressing feedback promptly and effectively for ongoing improvement.



PENDA ITHINDA
EXECUTIVE DIRECTOR

ABBREVIATIONS

CDC	Centers for Disease Control and Prevention
CHPO	Chief Health Programme Officer
CMO	Chief Medical Officer
CRN	Chief Registered Nurse
CoRN	Control Registered Nurse
CQI	Continuous Quality Improvement
IPC	Infection Prevention and Control
I-TECH	International Training & Education Center for Health
IUM	International University of Management
MS	Medical Superintendent
MoHSS	Ministry of Health and Social Services
MO	Medical Officer
NHTC	National Health Training Centre
NQPS	National Quality Policy and Strategy
NUST	Namibia University of Science and Technology
OPD	Outpatient Department
PA	Performance Agreement
QA	Quality Assurance
QI	Quality Improvement
QM	Quality Management
RN	Registered Nurse
SHPO	Senior Health Program Officer
SMO	Senior Medical Officer
SOP	Standard Operating Procedure
SRN	Senior Registered Nurse
TB	Tuberculosis
UNAIDS	United Nations Programme on HIV/AIDS
UNICEF	United Nations International Children's Emergency Fund
WHO	World Health Organization

ACKNOWLEDGEMENTS

The development of the SOP for Patients / Clients Experience and Satisfaction, and revision of the exit patient questionnaires was achieved through an extensive consultative process with the support, participation, and valuable inputs from individuals in the public and private health sectors, training institutions, and development partners. The initial drafting workshop was held from 26 to 30 June 2023, with a total of 68 key stakeholders, including healthcare workers from the implementation level. This was followed by a validation workshop, consisting mainly of technical experts, from 11 to 13 June 2024, with a total of 34 participants.

Special thanks go to the following institutions:

- Ministry of Health and Social Services (MoHSS) Quality Assurance Division
- MoHSS National and Regional Health Directorates
- Healthcare workers from MoHSS public facilities
- World Health Organization (WHO) Namibia Country Office
- The Government of Japan
- Private healthcare facilities (Roman Catholic Hospital, Lady Pohamba Private Hospital, Rhino Park Private Hospital)
- Training Institutions: University of Namibia (UNAM), Welwitchia University, Namibia University of Science and Technology (NUST), International University of Management (IUM) and the National Health Training Centre (NHTC)
- International Training & Education Center for Health (I-TECH)
- IntraHealth Namibia
- The United Nations Children's Emergency Fund (UNICEF)
- Centers for Disease Control and Prevention (CDC) Namibia

These institutions participated in the consultative workshop during the development of the SOP for Patients / Clients Satisfaction Assessment and revision of the exit patient questionnaires. The full list of participants involved in the development process is attached in Appendices 7.3 and 7.4.

The development of the guidelines was made possible through the financial support of the government of Japan, WHO and CDC Namibia.

1 INTRODUCTION

Patient experience and satisfaction surveys measure patients' feedback on the care and services they receive. These surveys are essential for quality improvement (QI), patient-centered care, performance evaluation, identifying strengths and weaknesses, benchmarking, patient engagement, and compliance.

The Ministry of Health and Social Services (MoHSS) emphasizes the importance of patient experience and satisfaction as a core component of healthcare quality standards. These standards highlight the necessity of incorporating patient and family expectations and satisfaction into quality monitoring processes. Rooted in the 2022 National Namibian Quality Management Policy and Strategic (NQPS) Plan, patients experience and satisfaction aligns with Strategic Objective 2: Ensure client-centered care of consumers.

Active patient participation in their care improves effectiveness and satisfaction. Informed and dignified clients involved in treatment decisions are more likely to adhere to their plans, leading to better health outcomes. Patient engagement also requires empowering individuals, especially those with chronic illnesses or disabilities, with information and tools for self-care to reduce unnecessary services and costs.

Community participation is crucial, necessitating the strengthening or establishment of initiatives like health facility advisory committees that include community members as stakeholders. The MoHSS Namibia Health Facility Standards (1st Edition) stipulate that patient rights, privacy, and family involvement are crucial elements of healthcare delivery. The standards advocate for measures that protect patient privacy, respect cultural preferences, and ensure that patients and their families are fully engaged in the care process. Compliance with these standards is verified through patient care observations, record audits, and patient interviews, ensuring that staff adhere to the highest quality and ethical standards.

Healthcare facilities must establish robust client feedback systems to capture patient complaints and suggestions, forming a basis for continuous quality improvement (CQI). There is also a need to continuously raise awareness of patient rights and responsibilities, as highlighted in the Namibian Patient Charter, so that patients are informed and engaged in their care decisions.

This SOP details responsibilities at various healthcare management levels, patient experience and satisfaction strategies, monitoring and evaluation mechanisms, and guidelines for addressing feedback and complaints. By adhering to these guidelines, healthcare providers can ensure their services not only meet but exceed patient expectations, thereby enhancing the overall quality of healthcare in Namibia.

2

PURPOSE, SCOPE AND DEFINITIONS

2.1 Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish a framework for enhancing patient experience and satisfaction in healthcare facilities across Namibia. It aims to guide staff in delivering high-quality services, improving patient experiences, and promoting patient-centered care. This SOP aligns with the national Healthcare Facility Quality Standards by incorporating essential quality dimensions such as safety, timeliness, effectiveness, affordability, people-centeredness, friendliness, and accessibility. By adhering to these standards, healthcare facilities can ensure that the services provided are not only of high quality but also meet the expectations and needs of patients and their families.

2.2 Scope

This SOP is applicable to all healthcare facilities, including hospitals, health centres, and clinics (both public and private), operating within Namibia.

2.3 Definitions

2.3.1 Patient Experience

Patient experience refers to the overall journey and interactions a patient has with the healthcare system, including all aspects of their care from initial contact to follow-up. It encompasses the quality of communication with healthcare providers, the environment in which care is provided, the coordination of services, the accessibility of care, and the emotional and physical aspects of care delivery. Patient experience focuses on how patients perceive their care, including their feelings of being respected, heard, and involved in decisions about their treatment.

2.3.2 Patient Satisfaction

Patient satisfaction is defined as the degree to which patient expectations regarding healthcare services are met or exceeded. This includes aspects such as the quality of care received, the interaction with staff, and the overall healthcare experience, aligned with the Namibia Hospital Standards' emphasis on evaluating patient and family expectations and satisfaction.

2.3.3 Key Difference between Patient Experience and Satisfaction

Patient experience is a broad, holistic concept covering the entirety of the care process, while patient satisfaction is a narrower measure of how well specific aspects of that experience met the patient's expectations. Patient experience can influence satisfaction, but satisfaction focuses more on immediate perceptions and outcomes. Patient experience is therefore about the journey, and patient satisfaction is about the result of that journey.

2.3.4 Healthcare Facility

Any institution, clinic, healthcare centre, and hospital providing medical services to patients in Namibia, including both public and private hospitals.

2.3.5 Healthcare Provider

Any professional involved in delivering healthcare services, including doctors, nurses, radiologists, social workers, pharmacists, therapists, technicians, administrative staff, and support staff.

2.3.6 Patient-Centered Care

An approach that emphasizes involving patients in their own care, considering their preferences, needs, and values.

2.3.7 Namibian local definition of Quality of health care

Health care that is timely, safe, respectful, responsive and improves health outcomes in Namibia.

2.3.8 Performance Evaluation

A systematic process of assessing the efficiency, effectiveness, and quality of services provided by healthcare facilities and professionals.

2.3.9 Continuous Quality Improvement (CQI)

An ongoing effort to improve the quality of healthcare services by identifying problems, implementing solutions, and monitoring outcomes to enhance patient care and service delivery.

3 RESPONSIBILITIES

3.1 MoHSS National, Regional and District Levels

- a) The National Quality Assurance Division will be responsible for developing and disseminating guidelines and frameworks for patient experience and satisfaction initiatives.
- b) The Regional Management Team (RMT), the District Coordinating Committee (DCC), and the leadership of intermediate and national referral hospitals will monitor and evaluate the implementation of patient experience and satisfaction strategies. This will be achieved through quarterly reports submitted by facilities, supportive supervision visits, and performance agreements (PAs).
- c) The RMT, DCC, and the leadership of intermediate and national referral hospitals will provide training and support to staff to strengthen patient-centered care practices.

3.2 Healthcare Facilities level

At the healthcare facility level, the overall responsibility is to establish systems and processes that promote and sustain positive patient experience and satisfaction, ensuring a patient-centered approach to care. Each facility must take ownership of this responsibility by implementing the following measures:

- a) Establish a dedicated patient experience and satisfaction committee or team to oversee and drive initiatives related to these areas.
- b) Develop and implement comprehensive policies and procedures focused on patient experience and satisfaction, aligned with national Healthcare Facility Quality Standards.

- c) Conduct regular assessments to measure and monitor patient experience and satisfaction.
- d) Train staff on patient-centered communication and service delivery to ensure high-quality interactions and care.
- e) Address patient complaints and feedback promptly and effectively, following the procedures outlined in the Healthcare Facility Quality Standards. This includes:
 - Reporting, recording and investigating complaints.
 - Involving relevant personnel in the complaint management process.
 - Ensuring active participation of patients and families in resolving issues.
 - Providing timely feedback to patients and/or families within an established timeframe.
 - Addressing identified deficiencies in care delivery.
 - Reviewing complaints to identify recurring themes and root causes to guide improvements.

3.3 Healthcare Providers

Healthcare providers have the overarching responsibility to deliver compassionate, patient-centered care that upholds the principles of respect, safety, and quality. This includes adhering to professional standards and fostering trust and collaboration with patients and their families. Their specific responsibilities include:

- a) Treat patients with respect, dignity, and empathy, ensuring a positive patient experience.
- b) Communicate effectively and clearly with patients, ensuring their understanding of care and treatment.
- c) Actively involve patients in decision-making regarding their care to promote autonomy and satisfaction.
- d) Maintain strict confidentiality and privacy of patient information, adhering to legal and ethical guidelines.
- e) Provide accurate and timely information about treatment options, including benefits and risks, to support informed decision-making.
- f) Adhere to the national infection prevention and control (IPC) guidelines and hospital-level IPC Standard Operating Procedures (SOPs) to ensure patient safety and prevent healthcare-associated infections.
- g) Ensure a clean, comfortable, and welcoming environment for patients to enhance their experience and satisfaction.
- h) Participate actively in established complaint management processes, including reporting, recording, and investigating complaints (where applicable) and providing timely feedback to patients and families.

4

PATIENT EXPERIENCE AND SATISFACTION STRATEGIES

4.1 Patient Surveys and Feedback

- The MoHSS Quality Assurance Division at the national level will be responsible for developing a comprehensive set of questionnaires to assess various aspects of patient experience and satisfaction, in alignment with the national Healthcare Facility Quality Standards. This includes training of trainers (TOTs) in coordination with the regions on the proper use of the tool and establishing reporting systems in collaboration with health facilities, districts, and regions.
- The questionnaires should be thorough and address critical areas such as:
 - Patient rights, safety, and quality of care.
 - Accessibility and responsiveness of the health system.
 - Respect for patient individuality, including their preferences, values, and expressed needs.
 - Support for patients' socio-cultural and emotional needs.
 - Effective communication between patients and healthcare providers.
 - Coordination and integration of care services.
 - Safety and continuity of care.
 - Empowering patients, families, and communities to actively participate in the care process.
 - Creating a welcoming and patient-friendly built environment.
- Ensure that the questionnaires are administered at appropriate times to maximize response rates and reliability of feedback. Consider patient comfort and readiness to provide feedback.
- Staff should be trained not just on how to administer the questionnaire, but also on the importance of confidentiality and ethical considerations in handling patient data as well as the issues of concern raised.
- Introduce the questionnaire to patients, by explaining its purpose and how it contributes to improving service quality, and how feedback provided will strengthen and improve the quality of healthcare services provided in the facility ensures.
- Obtain informed consent from patients by ensuring that patients understand that their participation is voluntary and that their responses will be used to improve quality and care standards.
- Staff should assist patients who may have difficulty understanding or completing the questionnaire, thus ensuring inclusivity and accessibility.
- Establish a secure process for collecting and storing completed questionnaires to maintain patient confidentiality such as “suggestion boxes” currently utilised in most healthcare facilities. Healthcare facilities should create an electronic database (e.g., excel sheet) or a register book to record complaints from patients, actions taken and feedback provided to the patient and their family members.
- Analyse responses to identify patterns and areas for improvement.
- Prepare and share comprehensive reports, developing action plans based on feedback and compile detailed reports that outline findings and recommendations. The reports must be shared with respective facility staff, district, regional and national level. All levels are encouraged to utilise the reports to make informed decisions and for planning purposes.
- Continuously monitor and evaluate the impact of interventions. The effectiveness of implemented changes must be assessed regularly and adjusted and adapted as needed to continuously improve patient experience and satisfaction.

4.2 Addressing Gaps

- Analyse patient and family members feedback to identify concerning trends and prioritize performance gaps. Action on the feedback provided should be prioritized based on the impact on patient care and safety.
- Develop clear, actionable health facilities improvement plans with specified goals and timelines. The QI plans should align with national quality standards and be integrated into the facility's overall quality improvement strategy. Specific responsibilities should be assigned to the team or individuals for implementing quality improvements measures, thus ensuring accountability and continuous progress.
- Develop and implement evidence-based strategies and interventions to address the specific gaps identified through feedback analysis. This approach should be multidisciplinary, involving all relevant departments that will be implementing the specific interventions.
- Continuously monitor the outcomes of implemented strategies/ interventions using locally defined indicators. Evaluation should be ongoing and adjust strategies/ interventions as necessary to ensure effectiveness
- Regularly communicate progress and provide feedback to the staff, more so on investigation findings and action taken. Recognizing successes is vital for fostering a culture of improvement, therefore celebrate achievements.
- Foster an environment of continuous improvement through strengthening a culture where continuous improvement is a priority. Engage all staff in training and development to sustain quality improvement efforts.

4.3 Staff Training

- Build capacity of staff on patient-centered communication, empathy, and cultural sensitivity during the provision of care. Thus, equipping staff with the skills to understand and respond to the diverse cultural and emotional backgrounds of patients, as mandated by Healthcare Facility Quality Standards, which stress the importance of patient-centered care practices.
- Train staff on handling difficult or sensitive situations. This will equip them with practical skills to manage challenging interactions, ensuring they can maintain professionalism and compassion in stressful circumstances.

4.4 Communication and Information

- Ensure clear communication with patients and their families. Healthcare facilities must develop and implement SOP that will ensure that feedback is provided in an understandable and respectful manner, aligning with hospital standards that prioritize patient rights and engagement.
- Provide information about services, treatment plans, and outcomes. Inform patients and families about the full scope of care plans, including potential outcomes and any changes, to foster transparency and trust.
- Use various visual aids and multilingual materials, ensuring that information is accessible to all patients, regardless of language barriers or literacy levels.

4.5 Waiting Time Management

- The nationally agreed-upon time range for waiting times in outpatient departments is two hours. For the emergency department, waiting times vary depending on triage codes, in line with established standards that prioritize patient acuity and need.
- To minimize waiting times, it is essential to optimize patient scheduling processes, incorporate effective triage systems, and enhance communication channels. These measures aim to improve patient experience and satisfaction, ensure better service delivery, and align with Namibia Healthcare Facility Quality Standards, which underscore the importance of efficiency and timeliness in patient care.
- Continuously reviewing and streamlining patient flow processes is crucial to identifying and eliminating bottlenecks, thereby enabling a smoother patient journey. By regularly analyzing waiting times, facilities can implement targeted improvements, enhancing both the patient experience and the overall efficiency of healthcare resource utilization.
- Hospitals and clinics are encouraged to integrate technological tools and data analytics to track waiting times, ensuring real-time monitoring and prompt interventions to reduce delays.
- Collaboration among healthcare providers, including administrative and clinical staff, plays a key role in identifying areas for improvement, fostering a culture of responsiveness to patients' needs.

4.6 Patient-Centered Facilities

- Ensure that waiting areas are well-maintained, clean, and comfortable, providing a welcoming environment that respects patient dignity, aligning with Healthcare Facility Quality Standards on facility cleanliness and patient comfort. Guarantee availability and accessibility of facilities for patients with disabilities by ensuring the availability of ramps, accessible restrooms, and signage, in compliance with standards for inclusivity and accessibility.
- Ensure sufficient parking spaces and necessary amenities to accommodate the needs of patients and visitors, improving accessibility and convenience, consistent with best practices in patient-centered care.

4.7 Complaints and Grievances Management

- Establish a clearly documented process to follow for patients and families to voice complaints. This process of informing patients of their rights and how to engage in the complaint resolution process as outlined in the Namibia Hospital Standards should be easily accessible and transparent.
- Healthcare facilities should ensure that all complaints are investigated thoroughly and addressed within the prescribed timeline to mitigate issues and improve patient care quality. The healthcare facilities must establish procedures for the reporting, recording, investigation, and response to complaints, including the involvement of necessary personnel. Communicate outcomes to patients and implement improvements. Once a complaint is resolved, communicate the outcome to the patient or family promptly, ensuring transparency and closure. Implement necessary changes to prevent future occurrences.
- Refer to national standards on management of grievances.

5

MONITORING PROGRESS

5.1 Monitoring and Evaluation

- Patient experience and satisfaction should be monitored monthly using questionnaires and feedback mechanisms. This regular assessment ensures alignment with quality standards and a patient-centered approach to care.
- Systematically analyse data to identify trends and areas for improvement. This ongoing analysis should inform quality improvement initiatives.
- Disseminate findings to staff to foster an environment of continuous quality improvement and enhanced patient care. Additionally, the findings should be shared with the public through channels such as health facility advisory committees and other community engagement platforms to promote transparency and collaboration.

5.2 Documentation and Reporting

- Maintain comprehensive records of patient experience and satisfaction questionnaire, complaints, and improvement initiatives. Ensure that these documentations are easily accessible and securely maintained, as per hospital standards for documentation.
- Prepare and submit quarterly detailed reports on patient experience and satisfaction, complaint outcomes, and the efficacy of implemented improvements. to the regional Nursing Service Manager and national level Quality Assurance Division, and other as and when required.

5.3 Compliance and Review

- All healthcare facilities are required to adhere to the guidelines outlined in this National SOP. Additionally, healthcare facilities must also actively monitor their compliance to ensure that all aspects of patient care and service delivery meet the required standards. The MoHSS will periodically review and update this SOP as necessary, to adapt to new healthcare challenges, advancements in medical practices, feedback from staff and patients and the latest evidence -based recommendations.

6

CONCLUSION

This National SOP is a crucial framework developed to ensure that all patients in Namibia receive high-quality, patient-centered care. By adhering to this SOP, healthcare facilities and providers commit to delivering services that meet or exceed patient expectations in a respectful, empathetic, and efficient manner.

The SOP covers various aspects of patient care, including:

- **Patient Satisfaction:** Ensuring that healthcare services are delivered in a manner that aligns with patient expectations and needs.
- **Communication:** Maintaining clear and effective communication channels between patients, their families, and staff.
- **Waiting Time Management:** Implementing efficient processes to minimize wait times and enhance patient experience.
- **Facilities:** Providing clean, accessible, and comfortable facilities to enhance the overall patient environment.
- **Complaints Management:** Establishing robust mechanisms for addressing and resolving patient grievances promptly and effectively.
- **Staff Training:** Continuously educating healthcare staff on patient-centered practices and communication to ensure that they can effectively meet the needs of patients.
- **Monitoring and Evaluation:** Regularly assessing the effectiveness of the healthcare services provided and making necessary adjustments to improve outcomes.
- **Documentation and Reporting:** Keeping thorough records of patient interactions, feedback, and care outcomes to facilitate ongoing monitoring and quality improvement.

The SOP also emphasizes the importance of continuous improvement through regular monitoring, evaluation, and revision of practices. It aims to foster an environment of transparency, accountability, and proactive engagement, where patient experience and satisfaction is a fundamental component of healthcare delivery.

By implementing this SOP, staff and facilities in Namibia can strengthen healthcare service quality, increase patient trust, experience and satisfaction, and ultimately improve overall patient health outcomes. This commitment to excellence and continuous improvement will contribute to the overall effectiveness of Namibia's healthcare system.

7 APPENDIX

7.1 Outpatient Experience and Satisfaction Questionnaire



REPUBLIC OF NAMIBIA
MINISTRY OF HEALTH AND SOCIAL SERVICES

Patient Experience and Satisfaction Questionnaire - Outpatient

Facility Name..... Contact number.....
 District..... Age.....
 Department..... Sex.....
 Completed by..... Reason for visit.....
 Arrival time at facility..... Departure time from facility.....

Kindly complete the questions below to help improve our services

		Very satisfied	Satisfied	Unsure	Dissatisfied	Very dissatisfied
1.	How satisfied are you with the friendliness and courtesy of healthcare providers?					
2.	How satisfied are you with the services received from healthcare providers? Rate each cadre(s) who assisted today.					
	<input type="radio"/> Nurse					
	<input type="radio"/> Doctor					
	<input type="radio"/> Health assistant					
	<input type="radio"/> Pharmacy staff					
	<input type="radio"/> Admin staff					
	<input type="radio"/> Other (specify)					

3.	How satisfied are you with the cleanliness of the healthcare facility environment?					
4.	How satisfied are you with the waiting time (before you received service) at each applicable service point?					
	o Reception/Registration					
	o Parameters					
	o Screening					
	o Doctor's room					
	o Procedure room					
	o Pharmacy					
	o Radiology					
	o Others (specify)					
5.	How satisfied are you with the privacy ensured during consultation with the health care providers?					
6.	How satisfied are you with the health education provided regarding your medical condition?					
7.	How satisfied are you with the affordability of the healthcare services provided?					
8.	Overall experience in the healthcare facility					

9. Would you recommend this facility to a friend or relative?

Yes	No	Unsure	N/A
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10. Additional comments/ recommendations?

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Kindly note you can also contact **customer care services** for any complaints, or ask the health worker for assistance

7.2 Inpatient Experience and Satisfaction Questionnaire



REPUBLIC OF NAMIBIA
MINISTRY OF HEALTH AND SOCIAL SERVICES

Patient Experience and Satisfaction Questionnaire – Inpatient

Facility Name..... Contact number.....
 District..... Age.....
 Department..... Sex.....
 Completed by..... Reason for visit.....
 Arrival time at facility..... Departure time from facility.....

Kindly complete the questions below to help improve our services

		Very satisfied	Satisfied	Unsure	Dissatisfied	Very dissatisfied
1.	How satisfied are you with the friendliness and courtesy of healthcare providers?					
2.	How satisfied are you with the services received from healthcare providers? Rate each cadre(s) who assisted today.					
	o Nurse					
	o Doctor					
	o Health assistant					
	o Pharmacy staff					
	o Admin staff					
	o Other (specify)					
3.	How satisfied are you with the cleanliness of the healthcare facility environment?					
4.	How satisfied are you with the waiting time (before you received service) at each applicable service point?					

	<input type="checkbox"/> Reception/ Registration					
	<input type="checkbox"/> Parameters					
	<input type="checkbox"/> Screening					
	<input type="checkbox"/> Doctor's room					
	<input type="checkbox"/> Procedure room					
	<input type="checkbox"/> Pharmacy					
	<input type="checkbox"/> Radiology					
	<input type="checkbox"/> Others (specify)					
5.	How satisfied are you with the privacy ensured during consultation with the health care providers?					
6.	How satisfied are you with the health education provided regarding your medical condition?					
7.	How satisfied are you with the affordability of the healthcare services provided?					
8.	Overall experience in the healthcare facility					

9. Would you recommend this facility to a friend or relative?

Yes	No	Unsure	N/A
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10. Additional comments/ recommendations?

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Kindly note you can also contact **customer care services** for any complaints, or ask the health worker for assistance

7.3 Stakeholders: Review of the Patient Experience and Satisfaction Survey Standard Operating Procedures held on 26-30 June 2023

No	Name & Surname	Position	Duty Station	Region
1	John Sanyiwa	Senior Medical Officer (SMO)	Outjo DH	Kunene
2	Mungandjo Muteze	Senior Registered Nurse (SRN)	Outjo DH	Kunene
3	Thecla Kongoro	SRN	Khorixas	Kunene
4	Samuel Shilikomwenyo	Control Registered Nurse (CoRN)	Otjiwarongo	Otjozondjupa
5	Paidamoyo Mandudzo	Medical Officer (MO)	Otjiwarongo	Otjozondjupa
6	Hilma M Shimwandi	SRN	Grootfontein	Otjozondjupa
7	Johannes Lumbu	CoRN	Oshikoto	Oshikoto
8	Ester Ileka	MO	Omuthiya	Oshikoto
9	Sylvia Mwanyangapo	SRN	Tsumeb	Oshikoto
10	Loini Talishi Shivolo	Anaesthesiologist	Onandjokwe	Oshikoto
11	Suama P Nghikembwa	Registered Nurse (RN)	Onandjokwe	Oshikoto
12	Elise Venter	Lecturer	IUM	Khomas
13	Agnes Mudabeti	Chief Registered Nurse (CRN)	Katima Mulilo	Zambezi
14	Douglas Musweu	SMO	Katima Mulilo	Zambezi
15	Daniel Simataa	SRN	Katima Mulilo	Zambezi
16	NT Nhinda	Chief Medical Officer (CMO)	IHO	Oshana
17	Helvi Iimbangu	CoRN	IHO	Oshana
18	Josefina Kanyama	SMO	IHO District	Oshana
19	Naemi L Kadila	CRN	Regional	Oshana
20	Rauha Junias	SRN	IHO	Oshana
21	Ewaldine Tjimune	RN Customer Care	Swakopmund	Erongo
22	Leonardt Mauha	CRN	Swakopmund	Erongo
23	Augustus Gawab	SMO	Walvis Bay	Erongo
24	Kondjee K Hidengwa	SRN	Roman Catholic Hospital	Khomas
25	Josephine Hango	CRN	Eenhana	Ohangwena
26	Olivia Ndaoya	SRN	Eenhana District Hospital	Ohangwena
27	Matti Kandjimi	SMO	Engela District Hospital	Ohangwena
28	Zwartz Faith	CRN	Keetmanshoop	Karas
29	Ambrosius Nakhom	RN	Karasburg	Karas
30	Claudia Kambonde	CoRN	Windhoek Central Hospital	Khomas
31	Shaanika Eliaser	SRN	Windhoek Central Hospital	Khomas
32	Wilkka Imene	SRN	Windhoek Central Hospital	Khomas
33	Colleen Kavari	RN/Lecturer	University of Namibia	Khomas
34	Kalista Runone	Lecturer	University of Namibia	Khomas
35	Taimi A Nauiseb	Senior Lecturer	University of Namibia	Khomas
36	Reinhold Kafidi	MO	Tsandi District Hospital	Omusati
37	Lucia Shikwambi	CoRN	Outapi	Omusati
38	Beata N lipinge	SRN	Okahao District Hospital	Omusati

39	Beata Siteketa	CMO	Nkurenkuru Region Management Team (RMT)	Kavango West
40	Glennson E Haihambo	SMO	Nankudu District Hospital	Kavango West
41	Adeline Kudumo	CoRN	Nkurenkuru	Kavango West
42	Geraldine A Beukes	SMO	Intermediate Hospital Rundu	Kavango East
43	Nicodemus H.Mundjenge	CoRN	Rundu	Kavango East
44	Hausiku Martina	CoRN	Rundu	Kavango East
45	Kauraisa Angeline	SRN	Regional Management Team	Hardap
46	Aaron Kebalepile	MO	Aranos District Hospital	Hardap
47	Moses Shikomba	RN	Mariental District Hospital	Hardap
48	Beauty Rjarua	Lecturer	Welwitchia Health Training Centre	Khomas
49	Alice Kabongo	SMO	Gobabis District Hospital	Omaheke
50	Japuiria Mbatara	RN/Midwife	Gobabis District Hospital	Omaheke
51	Nelao Shamandjolo	RN/Midwife	Gobabis District Hospital	Omaheke
52	Silvia Wabomba	Science Advisor	Centers for Disease Control and Prevention	Khomas
53	Lukas Kondo	RN Customer Care	Intermediate Hospital Katutura	Khomas
54	Elizabeth Hamwaanyena	CoRN	Intermediate Hospital Katutura	Khomas
55	Moses Uazikiza	RN Customer Care	Intermediate Hospital Katutura	Khomas
56	Irja Thele	SRN	Intermediate Hospital Katutura	Khomas
57	Julie Neidel	QM Officer	MoHSS Quality Assurance Division (QAD)	Khomas
58	Ujama Nujoma	Acting SMO	Mental Health	Khomas
59	Ndapewa Jason	TB QI Coordinator	Directorate of Special Programmes	Khomas
60	Michelle Allies	Administrative Officer	MoHSS Quality Assurance Division	Khomas
61	Hilma Shikololo	HIV QI Program Officer	Directorate of Special Programmes	Khomas
62	Aina Erastus	Quality of Care and Health Service Delivery Officer	World Health Organisation	Khomas
63	Apollo Basenero	CMO	QAD	Khomas
64	Francina Tjituka	Control RN	QAD	Khomas
65	Sussana Severinus	Administrative Officer	QAD	Khomas
66	Ashivudhi Hilaria	Health System Strengthening - Team Lead	CDC	Khomas
67	Esperanca J Van Der Merwe	Senior Health Program Officer (SHPO)	Primary Health Care (PHC) – Family Health Division	Khomas
68	Linea Nanyalo	Anaesthesiologist	IHK	Khomas

7.4 Stakeholders; Validation and Finalisation of the Patient Experience and Satisfaction Survey Standard Operating Procedures held on 11-13 June 2024

No	Name & Surname	Position	Duty Station	Region
1	Odon T Nkongolo	CMO	Eenhana	Ohangwena
2	Francina Ananias	CMO	Outapi	Omusati
3	Jonah Garoeb	CMO	Gobabis	Omaheke
4	Adeline Kudumo	CRN	Nkurenkuru	Kavango West
5	Beata Siteketa	CMO	Nkurenkuru	Kavango West
6	Cynthia Frey	CRN	Rehoboth	Hardap
7	Ambrosius Nakhom	Acting SRN	Karas	karas
8	Leonard Kabongo	CMO	Swakopmund	Erongo
9	Johannes Lumbu	CRN	Onandjokwe	Oshikoto
10	Noel Siame	CMO	Katima	Zambezi
11	Indongo Frans Enkono	CMO	Rundu	Kavango East
12	Mugisha Barongo	CMO	Opuwo	Kunene
13	N T Nhinda	CMO	Oshakati	Oshana
14	Lorenta I Ojo	SMO	Onandjokwe	Oshikoto
15	Irene K Hidengwa	Quality Assurance / Risk Management	RCH	Khomas
16	Taimi A Nauseb	Lecturer	UNAM	Khomas
17	Theopolina Mulokoshi	Acting Head of QAD	QA	Khomas
18	Aina Erastus	Quality of Care and Health Service Delivery Officer	WHO	Khomas
19	Saima Natanael	Chief Health Program Officer (CHPO)	QA	Khomas
20	Florence Mulonda	Acting National IPC Focal Person	QA	Khomas
21	Mohamed Said	Deputy Director, Care and Treatment Services	I-TECH	Khomas
22	Magdalena Lutaka	Radiographer	RAD	Khomas
23	Juanita Naobeb	Acting Head of Department	WCH/IHK	Khomas
24	Natanael Naftal	CMO	RMT	Khomas
25	Emma Iyambo	CHPO	HO-MHSS	Khomas
26	Caeser Magumba	Project Director	IntraHealth Namibia	Khomas
27	Esperanca Van Der Merwe	SHPO	PHC-FHD	Khomas
28	Sussana Severinus	Administrative Officer	QAD	Khomas
29	Albertina Nangolo	National QM Monitoring & Evaluation Officer	QA/MHSS	Khomas
30	Kalista Runone	Lecturer	UNAM	Khomas
31	Paheye Kambinda	Chief Radiographer	National Level	Khomas
32	TN Iileka	SMO	Paediatrician	Khomas
33	Apollo Basenero	CMO	QAD	Khomas
34	Leena Ashipala	SMO	Forensic	Khomas

