MSI
REPRODUCTIVE CHOICES

How we listen to and learn from our clients

Evaluating MSI's client feedback tools and resources

2024

MSI's commitment to client-centred care

MSI Reproductive Choices (MSI) is one of the world's largest family planning and reproductive healthcare organisations. Delivering services to women and girls worldwide for over 45 years, MSI is now operating in 36 countries as one of the world's largest providers of family planning and reproductive healthcare.

MSI prevents unintended pregnancies and unsafe abortions by providing a range of sexual and reproductive health products and services through our facilities and in partnership with government and private health providers. MSI is committed to delivering client-centred healthcare as part of our MSI 2030 Strategy. This means putting our clients at the centre and holding ourselves to account, not just for what we do but how we do it.

The MSI client-centred care strategy is a practical approach to ensuring that MSI teams deliver on the commitment to provide sexual and reproductive health and rights (SRHR) programming that puts clients' interests first and ensures we listen to and are responsive to their needs. To help deliver on this, in 2022 we set out to strengthen our collection of real-time client feedback so that we can effectively adapt and respond to client needs.

The MSI client-centred care framework (see below) and strategy recognise the critical influence of organisational culture and protocols, and staff well-being and competency, to ensuring positive client experiences. Many of the commitments outlined in the MSI client-centred care strategy rely on the effective collection and use of feedback from the clients that we serve.

At the organisation level, our commitments include measuring and rewarding success by our clients' experiences of our services. We cannot do this without mechanisms to collect data on their experiences.

One way we support our teams is to recognise and celebrate staff members' achievements. Our clients are often best placed to highlight when staff members have gone above and beyond and had a positive impact on the lives of the people they're serving. Client feedback is a powerful tool to support this.

Finally, we commit to listening to our clients and treating them as an active partner in their care. This means ensuring comprehensive client-centred counselling to support informed choices, but also providing clients with options to tell us more about their experience.

An organisation that cares
- Values-driven organisational culture
- Leaving no one behind
- Total confidentiality
- Measures and rewards success by the client experience

Staff who are supported and cared for
- Client centred and clinical competence
- Well-being supported
- Achievements recognised

Positive and empowering client experiences
- Fully informed of their choices
- Listened to and respected as an active partner
- Able to access appropriate follow-up care and wider SRH services

Our feedback challenge:
How do we ensure we are listening to the millions of clients we serve?

Ensuring our teams can effectively collect and use client feedback was an ongoing challenge across MSI programmes. We embarked on an insight-gathering exercise to understand how we could change this.

To expand access to sexual and reproductive healthcare to reach those most in need, MSI often provides free services. But strong power dynamics related to free service provision, community status, and age, all affect a client's willingness and comfort to provide feedback.

Some fear critical healthcare services being discontinued if they give negative feedback. This can result in consistently high satisfaction scores, which make it difficult to know how to improve.

Though supplementary qualitative efforts can help with this, they cannot be implemented regularly, nor do they result in timely feedback for change.

Given the diversity of clients served by MSI teams, ensuring feedback options that meet their needs, for example, in terms of literacy and language, remains challenging. Programmes have historically relied on paper questionnaires to capture client feedback. The lack of alternatives to written forms doesn't provide an inclusive solution for all our clients.

The volume of potential feedback data also presents difficulties. If we are to deliver on our commitment to act on and respond to client feedback, teams need timely access to this data to inform actions and improvements. Processing large numbers of paper forms is manual, time-consuming and resource-intensive, leaving teams less time to ensure feedback is addressed.

> **Clients need to have confidence that there will be an outcome if they complain."**
>
> **– MSI Kenya team member**

Developing a new MSI global feedback toolkit

In 2020, the MSI client experience team—with initial support from design agency *ThinkPlace*—launched a project to develop tools to collect actionable client feedback in real time across MSI programmes, and design mechanisms to enable our teams to operationalise client feedback for ongoing improvement.

We used a human-centred design (HCD) approach to ensure that the needs and perspectives of those we were designing for (MSI clients and MSI frontline teams) were effectively informing potential solutions.

Phase 1: Understanding user requirements (6 months)

- Virtual consultations and workshops with MSI teams from around the world.
- In-person insight gathering with clients and MSI teams in Kenya and Senegal.
- Ideation sessions with MSI global and in-country teams to generate ideas based on the insights.
- Prototyping design sprint in Kenya and Senegal to user-test solution ideas.
- Consolidation of the prototyping feedback to inform a design brief for new feedback solutions.

Phase 2: Build of new feedback solutions (12 months)

- Contracting support for the design and technical build.
- Cognitive (in Senegal) and A-B testing (In Nigeria) of the feedback question options.
- Development and testing of visual indicators for all questions.
- User-testing and feedback on all elements of the solution.

Phase 3: Pilot (6 months)

- Soft launch of the MSI client feedback solutions with selected MSI teams, Uganda, Ghana, Senegal, Sierra Leone and Cambodia.

Phase 4: Pilot evaluation (2 months)

- Mixed method evaluation of the pilot phase in four MSI programmes: Cambodia, Ghana, Senegal, Sierra Leone.

Our feedback solution:
A global toolkit designed with MSI teams

Our toolkit includes:

A validated set of standardised client feedback questions and metrics

Three options for collecting client feedback

Guidance for MSI teams on how to select the right mechanism and how to promote and communicate feedback options to clients

A global client feedback data hub in Power BI, providing real-time access to feedback data for MSI teams

Training resources to build the capacity of MSI teams to support, use and act on client feedback

Our three options for collecting client feedback:

1 A digital feedback form

An electronic form that customers can fill in after their visit to give feedback on their experience. There are multiple ways to use the form: via tablet and offline functionality, online access to the form via a link or QR code, or over the phone with the support of the contact centre.

2 SMS survey

Third-party telephone systems can send bulk SMS messages to customers at the end of their visit. Users can provide their feedback by answering the questions via SMS. It can be connected to our client health record system to provide access to the contact details of customers who agree to be re-contacted. The survey can also be activated by the client using a keyword.

3 Feedback box and form

In contexts where resources are limited, clients may still prefer a paper feedback form, or the opportunity to make suggestions in a suggestion box. The form uses visual elements to make it as accessible as possible to low-literacy clients. Data from the forms can then be entered into an electronic form by the MSI team.

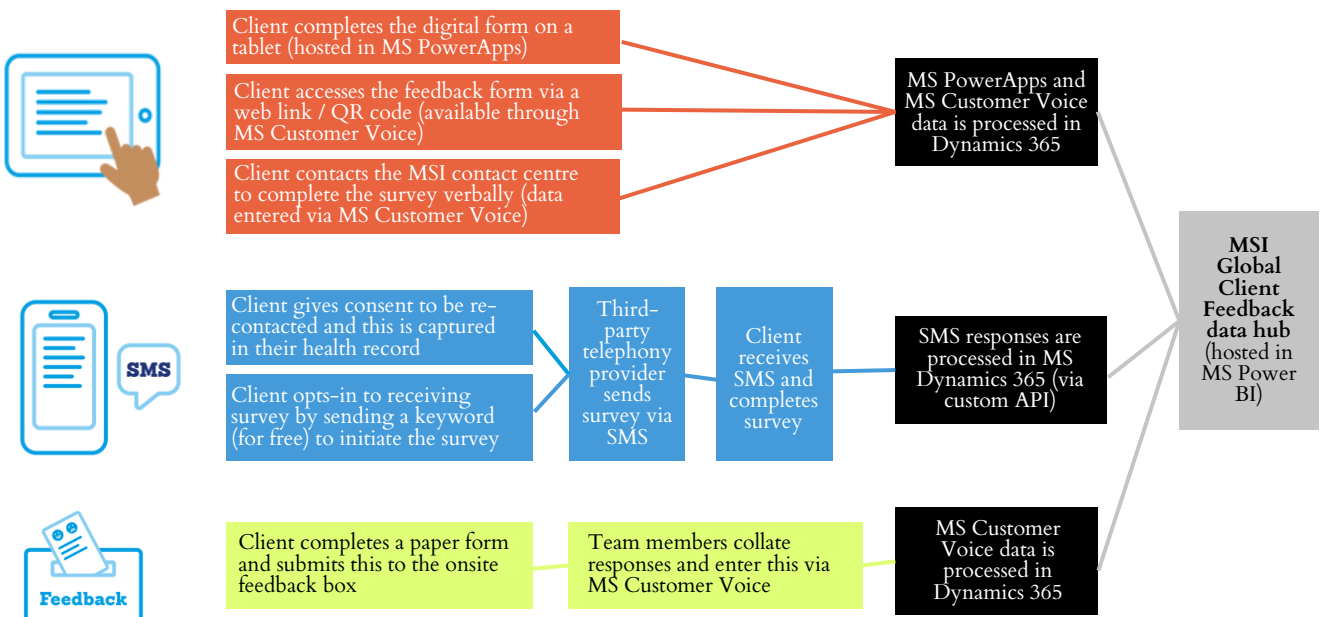## How the toolkit resources leverage technology and work together

We can leverage existing technology via the Microsoft (MS) stack to develop a fully integrated approach to address the collection, processing and visualisation of client feedback data.

MSI teams select and roll-out the feedback collection mechanisms best suited to their context

Clients benefit from different ways to provide feedback following their healthcare visit

All feedback data is collated centrally

Data is visualised and made available to MSI teams via a global data hub

Client completes the digital form on a tablet (hosted in MS PowerApps)

Client accesses the feedback form via a web link / QR code (available through MS Customer Voice)

Client contacts the MSI contact centre to complete the survey verbally (data entered via MS Customer Voice)

MS PowerApps and MS Customer Voice data is processed in Dynamics 365

Client gives consent to be re-contacted and this is captured in their health record

Client opts-in to receiving survey by sending a keyword (for free) to initiate the survey

Third-party telephony provider sends survey via SMS

Client receives SMS and completes survey

SMS responses are processed in MS Dynamics 365 (via custom API)

MSI Global Client Feedback data hub (hosted in MS Power BI)

Client completes a paper form and submits this to the onsite feedback box

Team members collate responses and enter this via MS Customer Voice

MS Customer Voice data is processed in Dynamics 365

Our feedback solution:
Selecting the right metrics

Making sure we ask the right questions

Initial insights highlighted the importance of including the right questions on our feedback form.

The survey needed to be short enough not to put a burden on clients, but still generate enough insight into client experience to inform service improvements.

During phase 2 of the project, we explored different sets of questions using:

- Cognitive testing (in Senegal) to understand client comprehension and interpretation of different question concepts.
- A-B testing (in Nigeria) to gather insight into the ideal combination and length of the questions.

Further user-feedback was collected during sessions in Kenya, Senegal and Uganda to decide on the response scales and visuals to be used.

Our feedback questions

Our final set of feedback questions includes questions to collect recognised client experience metrics, as well as those exploring our priority areas of client experience. Testing indicated we could reliably collect these via a self-complete feedback form.

The questions are easily translated into three core client experience metrics:

A **client satisfaction score (C-SAT)** out of 5—this tells teams how satisfied clients are with their overall healthcare experience.

A **Net Promoter Score (NPS)**, based on a rating out of 10 for likelihood to recommend—this tells teams how likely clients are to promote MSI services.

A **client experience (CX) score**, an average of scores out of five for (5) key domains of client experience, including waiting time, respect, comfort and privacy—this tells teams whether they are delivering the healthcare experience we promise as part of our commitments to client care.

Ensuring access to client feedback data
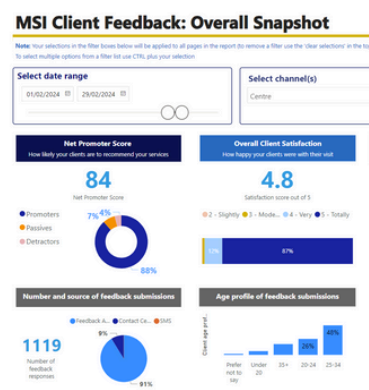
The **MSI Global Client Feedback Data Hub** ensures it is easy for teams to access their feedback data and use the insights generated to inform service improvements and celebrate positive feedback.

The hub provides access to data collected from any globally recommended solution. All data is linked to Microsoft Power BI through API connections. Simple visualisations allow for easy viewing and analysis of feedback trends and key insights.

The use of the Power BI platform also helps maintain the highest standards of data security.

Evaluating the feedback pilot

Starting in June 2023, the feedback toolkit was soft-launched with selected MSI country programmes. Four country programmes were chosen for the pilot operational evaluation: Cambodia, Ghana, Senegal and Sierra Leone.

In some cases, introducing the new tools addressed the lack of substantive feedback mechanisms in the programme. In others, the new feedback tools replaced existing mechanisms including suggestion boxes and paper forms.

The evaluation focused on the service delivery channels and sites where teams began their feedback roll-out. It explored experiences of using the toolkit and resources, and the programme's collection of client feedback during the pilot period (July-December 2023). A mixed-method approach was used to provide insight into the following key questions:

- In what ways does the MSI global client feedback toolkit help generate reliable data and actionable insights into MSI client experience?

- In what ways does the MSI global client feedback toolkit help ensure a positive culture among MSI teams where positive client experiences are recognised and valued by MSI teams?

- In what ways does the MSI global client feedback toolkit help ensure that MSI clients feel listened to and their feedback leads to more positive client experiences which encourage brand loyalty and word-of-mouth referrals?

Table: Pilot programmes, feedback options adopted and evaluation data collection methods

	Feedback option(s) adopted	Annual staff survey	Feedback data review	Clinical audits	Client exit interviews	Client follow-up survey	Qualitative staff feedback	Action plan review	Facility observations
Cambodia	Implemented the digital feedback form, administered by their contact centre with clients of their network of 22 MSI Ladies (mobile health providers)		✓	✓	✓		✓	✓	
Ghana	Implemented the tablet-based digital feedback form in their network of eight clinics	✓	✓	✓	✓	✓	✓	✓	✓
Senegal	Implemented the tablet-based digital feedback form in selected clinics and mobile outreach teams	✓	✓	✓	✓		✓	✓	
Sierra Leone	Implemented the tablet-based digital feedback form across their network of seven clinics and selected mobile outreach teams	✓	✓	✓			✓		

Quantitative methods

Staff survey data from two rounds of an annual staff survey is used to track staff perceptions of delivery of client-centred care. The first round in 2022 is used as a baseline, with the second round in 2023/24 coinciding with the end of the pilot. **2022 sample = 150, 2023 sample=134**

Feedback data review: Analysis of three months of client feedback data collected using the new feedback approaches (Oct–Dec 2023) is used to understand feedback response rates. We also compare the client profile of those providing feedback with the profile for all clients. **Total sample = 3,501**

Client Exit Interviews (CEI): Data from MSI's annual CEI, collected in Q4 2023, is used to triangulate feedback results with a secondary source that monitors similar client experience indicators. **Total sample = 1,201**

Clinical audit data: Audit data, collected by the MSI Medical Development Team is used to understand the extent to which MSI teams were meeting minimum feedback standards before and following the introduction of the new tools.

Client follow-up A short follow-up survey was completed with a sample of clients who provided feedback in Ghana clinics and consented to be re-contacted. The survey explored clients' experience of giving feedback and repeated several key questions from the original survey to allow a comparison of responses over time. **Total sample = 61**

Qualitative methods

Action plan review: A review of the countries' feedback action planning process was completed at the end of the pilot, to explore the extent to which feedback data was being effectively used to inform action planning.

Qualitative feedback from the pilot countries was collect at various points during the trial to understand what went well, any pain points for staff and clients and to what extent the toolkit was delivering on the priorities identified during user requirements gathering.

Facility Observations: Structured observation, including informal client and staff feedback, was completed in three MSI Ghana clinics. The observation looked at how the client feedback option was integrated into the client healthcare journey, including the physical set-up of digital devices in each site and how clients were being made aware of the option to provide feedback.

Pilot learnings

The new client feedback toolkit was successfully rolled out in a variety of MSI service delivery settings, reaching large numbers of clients

In Cambodia, the digital feedback form, administered by the contact centre during a post-service call, was used with clients of their network of mobile health providers (MSI Ladies). Ghana, Senegal, and Sierra Leone all used the digital feedback form on digital devices in their clinics. Clinics tend to be in more urban and peri-urban locations. Senegal and Sierra Leone also piloted the digital feedback form on a digital device in selected mobile outreach teams. These are MSI teams who visit sites in rural areas to provide services for one or two days at a time. The new feedback mechanisms were successfully rolled out in each of these settings during the pilot period.

3,501 **clients provided feedback** at pilot sites between October and December 2023

19% **response rate** — the proportion of all clients accessing healthcare services choosing to give feedback

Feedback response rates ranged from 8% in clinic settings in Ghana and Senegal, to between 22% and 58% in mobile outreach. Evidence from across the healthcare and customer service sectors indicates a response rate of 15% as a benchmark [1].
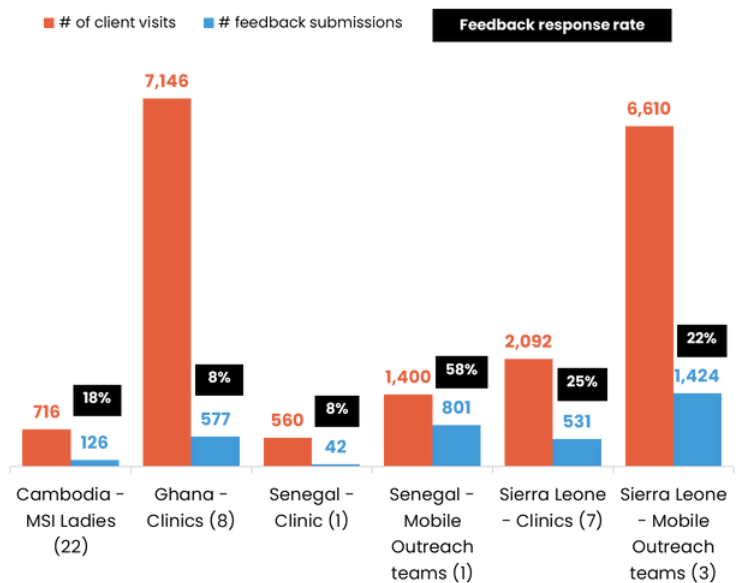
Differences in response rates are largely explained by the variation in how the feedback option is offered to clients in different service delivery settings.

In clinics, where digital devices are set up in discreet locations and clients are informed of the feedback option, but largely left alone to decide to provide feedback, response rates were lower (8%).

When administered over the phone in Cambodia, response rates increased to 18%.

Response rates were by far the highest in outreach (22%) where we know that MSI teams alert clients to the feedback option and often support them with the completion of the form.

Chart: Client visits, feedback submissions and response rates across pilot settings

■ # of client visits   ■ # feedback submissions   **Feedback response rate**

Cambodia – MSI Ladies (22): 716, 126, 18%
Ghana – Clinics (8): 7,146, 577, 8%
Senegal – Clinic (1): 560, 42, 8%
Senegal – Mobile Outreach teams (1): 1,400, 801, 58%
Sierra Leone – Clinics (7): 2,092, 531, 25%
Sierra Leone – Mobile Outreach teams (3): 6,610, 1,424, 22%

The new resources were well received by MSI teams and deemed easy to implement
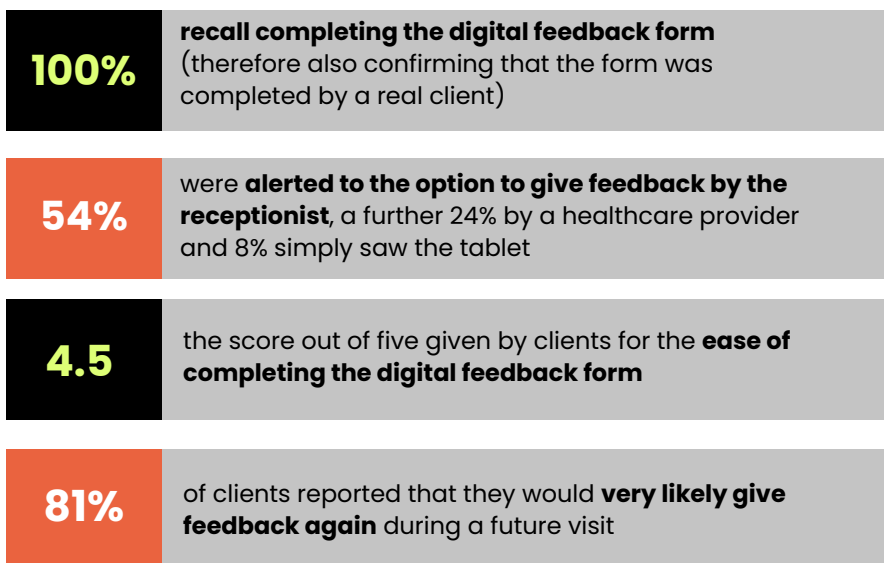
Qualitative feedback from MSI teams in each of the pilot country programmes indicates that the new feedback tools were well received. Staff were generally positive about the ease of setting up the client feedback mechanisms and many praised the reduction in workload that came with shifting from paper forms to digital options. The immediate access to visualised data provided by the Power BI data is also considered a massive benefit by many team members. There were some early issues with tech aspects of the new resources, with frontline teams having to get used to the new tools and deal with issues such as unreliable connectivity, but clear and open communication between frontline teams, country support offices and the global team helped to resolve challenges as they were identified.

[1] Net Promoter Score (NPS) benchmarks by industry

Clients were positive about being provided with the option to give feedback and the ease of completing the digital feedback form

A follow-up survey among MSI Ghana clients who used the new feedback mechanisms and agreed to be re-contacted, suggested a similarly positive response among clients.

Comments indicate that most clients recalled no difficulty completing the feedback form and that the process was straightforward. One respondent requested more time to enter comments (the digital form timed out after a period of inactivity, but this has now been extended to allow more time to the users to complete the form) and another suggested a guide be available to support those choosing to give feedback.

100% recall completing the digital feedback form (therefore also confirming that the form was completed by a real client)

54% were **alerted to the option to give feedback by the receptionist**, a further 24% by a healthcare provider and 8% simply saw the tablet

4.5 the score out of five given by clients for the **ease of completing the digital feedback form**

81% of clients reported that they would **very likely give feedback again** during a future visit

Clients agree that the opportunity to provide feedback on their healthcare experience is important and can impact how they feel about their healthcare provider

4.7 the score out of five given by clients for the **importance of being offered an opportunity to provide feedback** when using healthcare services

95% agreed "being given the **opportunity to provide feedback makes me feel more positive about MSI** as a healthcare provider"
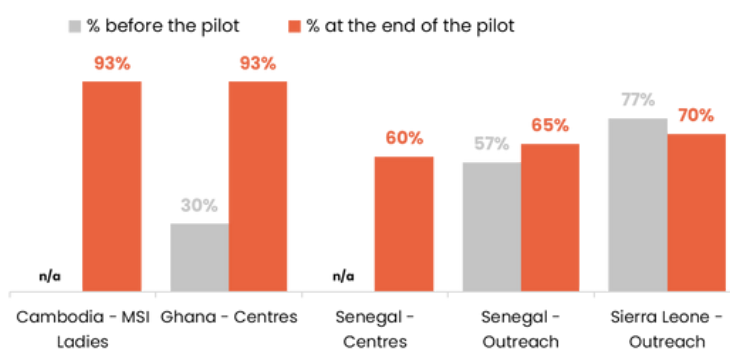
MSI staff feedback on the roll-out of the new tools highlighted that they felt their clients were not used to having a mechanism to share comments and concerns, and therefore clients were very positive about the opportunity to do so. This was mirrored by results from the follow-up survey of clients who used the new feedback form in Ghana.

The option to provide feedback helps build client awareness of how to raise issues and provide feedback

Working to make clients aware of their rights to provide feedback and share both positive and negative experiences is a key objective of the client feedback toolkit. While other mechanisms exist to support the reporting of these concerns, client-friendly (and anonymous) feedback options are also critical.

Data collected from client exit interviews towards the end of the pilot period in Cambodia and Ghana indicates that more than nine out of ten (93%) of clients confirmed that they knew how to provide feedback. Small improvements were also observed among Senegal's outreach clients.

Chart: The proportion of clients aware of how to provide feedback or raise an issue with their healthcare visit

■ % before the pilot   ■ % at the end of the pilot

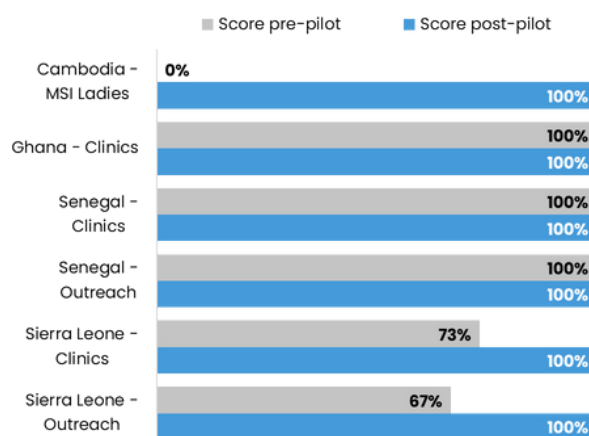|	Cambodia – MSI Ladies	Ghana – Centres	Senegal – Centres	Senegal – Outreach	Sierra Leone – Outreach
% before the pilot	n/a	30%	n/a	57%	77%
% at the end of the pilot	93%	93%	60%	65%	70%

The new tools are helping MSI teams develop and maintain effective action plans for quality improvements

Before the pilot, global clinical quality audits indicated that Cambodia and Sierra Leone were not meeting MSI's minimum standards for the collection of client feedback. In Senegal and Ghana, before the new feedback resources, standards were met using paper forms and feedback boxes and their associated challenges. By the end of the pilot, all programmes were meeting minimum feedback standards.

> **MSI minimum client feedback standards:**
> 1. A clear process in place for collecting, reviewing, and managing routine client feedback
> 2. Availability of past 3 months' action plans in response to client feedback
> 3. Action points from client feedback have been/are being acted upon.

Chart: Clinical quality audit scores for client feedback

Legend: Score pre-pilot | Score post-pilot

- Cambodia – MSI Ladies: 0% / 100%
- Ghana – Clinics: 100% / 100%
- Senegal – Clinics: 100% / 100%
- Senegal – Outreach: 100% / 100%
- Sierra Leone – Clinics: 73% / 100%
- Sierra Leone – Outreach: 67% / 100%

A review of pilot country programme action plans further highlighted:

Strong engagement across MSI teams with the data

Data collected through the new feedback tools is being used by support office teams and effectively cascaded to frontline teams (e.g. clinic managers, team leaders and mobile providers). Power BI provides key members of staff with direct access to the data and an easy way to generate summaries and reports that can be shared more widely.

Feedback is often reviewed by a cross-functional team, including representatives from channel management, marketing, clinical quality, etc. This helps ensure that actions identified span different elements of client experience, as well as ensuring the team responsible for addressing any action is included in its identification.

The almost immediate access to the data provided by the feedback data hub in Power BI means that data is being reviewed frequently (in some cases daily) and urgent issues can be escalated and addressed immediately, alongside the monitoring of trends over time.

Effective generation of insights and actions from the feedback data

MSI teams are finding it easy to pull out simple actionable insights from the feedback data, either from overall trends, comparisons between channels/sites and through the triangulation of data points with the open comments, as well as from the comments directly.

- Some of the actions identified so far have included more clearly communicating wait time to clients, updating the cleaning rota for clinic washrooms during peak times, addressing provider-specific feedback with team members, and escalating feedback on pricing to the senior management team.

- Feedback has also identified issues outside of general client experience e.g. potential fraud or safeguarding concerns. Teams have been able to escalate these through the standard reporting mechanisms for such issues.

When reviewing the feedback data, most teams are striking an effective balance between celebrating the positives and drawing attention to areas for improvement. Comments on specific providers are also being used to praise individual team members and even as part of performance management.

Overall, the feedback data was found to be reliable. Staff influence on who chooses to give feedback, and the feedback itself, needs to be monitored in some settings

The follow-up survey with MSI Ghana clinic clients enabled us to compare original feedback scores and the same questions asked 2-4 weeks later. The answers were captured by an interviewer over the phone.

- There was **little overall change in clients' likelihood to recommend MSIG services immediately post-visit vs. follow-up call** (9.2 average vs 9.1). More than half (52%) of clients provided exactly the same likelihood rating, and the majority (78%) gave the same rating or within one point of their original rating.

- In terms of overall satisfaction, **almost two-thirds of clients (63%) gave the same satisfaction score between time points;** 5% increased their rating; and 25% decreased their rating by 1 point, resulting in a small drop in satisfaction scores immediate post-visit vs. follow-up (4.8 vs 4.5).

- The follow-up survey also provided useful insight into the **reliability of the likelihood to recommend question as a predictor of clients promoting MSI services.** Half of the clients (52%) had spoken to someone about their healthcare service since their visit; 91% of these clients originally rated their likelihood to recommend as 9 or 10 out of 10 (i.e., were categorised by the NPS as promoters); 56% of promoters went on to recommend MSIG, compared to 33% of non-promoters.

A comparison of feedback data and healthcare registration data for all clients shows that the **age profile of those providing feedback does not generally differ substantially from the age profile of all clients accessing healthcare services** in most of the pilot programmes. This suggests that feedback options are proving accessible to clients of all ages. The exception was in Senegal, where in clinics, clients choosing to provide feedback tended to be younger. This likely reflects younger clients being more comfortable with digital feedback options.

In most pilot programmes, the **Net Promoter Score (NPS) for clients providing self-completed feedback at the end of their visit was broadly similar to that collected during the client exit interviews** (CEI). Cambodia scores were similarly very high from both data sources, while Ghana clinics and Sierra Leone outreach feedback scores were slightly more positive than the CEI. Senegal clinic feedback was slightly less positive than the CEI.

Again, the exception was Senegal where in Outreach their NPS of 100 was markedly higher than that collected via the CEI (61). This is likely due to a combination of factors. The first being how positive clients are towards the free services being provided by MSI teams in a setting where other options are very limited. The second being the influence of the Senegal team supporting clients to complete the survey. Further training will be provided to the team to mitigate this influence.

A more consistent trend was seen between client feedback and the CEI for client satisfaction, where **overall levels of positive responses were similarly high but those providing feedback were slightly less likely to give 'top box' scores.** This may be explained by the different response options used (score out of 5 vs. a 5-point agreement scale in the CEI). It may also suggest a scored response is slightly more sensitive, and therefore more effective at detecting changes in the strength of client satisfaction.

Chart: Age profile of all clients providing feedback, compared to all clients accessing healthcare services
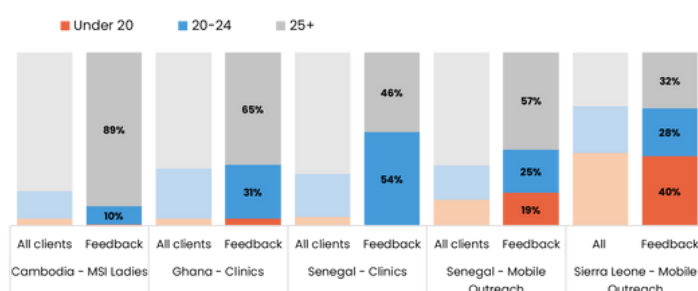

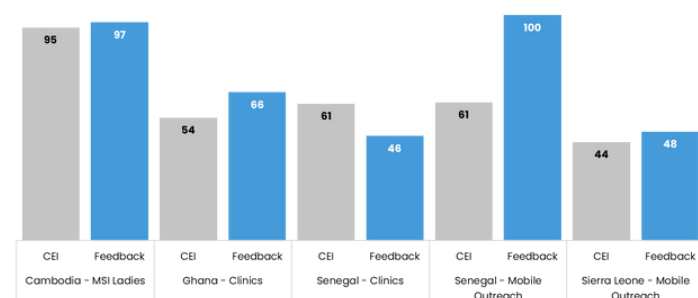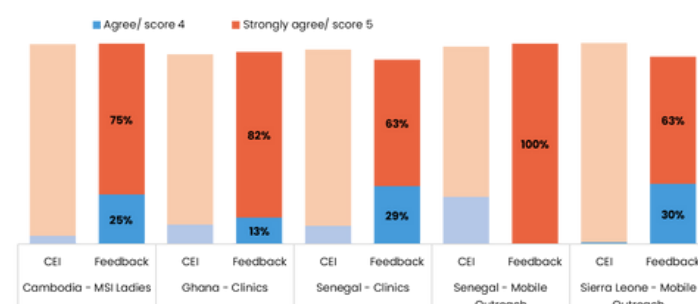Chart: Comparison of net promoter scores (NPS) collected via client feedback vs. client exit interviews (CEI)

Chart: Comparison of satisfaction scores collected via client feedback vs client exit interviews (CEI)

The introduction of new feedback mechanisms, staff training, and improved data access are all contributing to building a positive feedback culture among MSI teams in pilot programmes

Data collected from an annual staff survey indicate that, even before the pilot of the new feedback tools, MSI teams were already very positive about their delivery of client-centred care (CCC). Almost nine out of 10 (88%) in both Ghana and Senegal agreed with all four CCC statements.

Statements used to capture perceptions of MSI staff of the delivery of client-centred care
1) I believe MSI delivers a high-quality service to its clients
2) I feel confident clients receive the support they need to choose services they feel are right for their health and wellbeing
3) My team regularly discusses ways to improve the service for our clients
4) My colleagues show concern for the well-being of the clients we support in a caring and meaningful way

Staff survey results dropped slightly following the pilot (to 86% agreeing with all statements in Ghana and 81% in Senegal) shortly after the roll-out of the new tools.

Qualitative insights from teams suggest the pilot brought increased attention to the importance of client feedback. The staff survey results indicate increased staff reflection on how well teams are meeting the standards they now aspire to.

Chart: Staff survey scores for the delivery of CCC

■ 2022   ■ 2023

	Ghana	Senegal
2022	88%	88%
2023	86%	81%
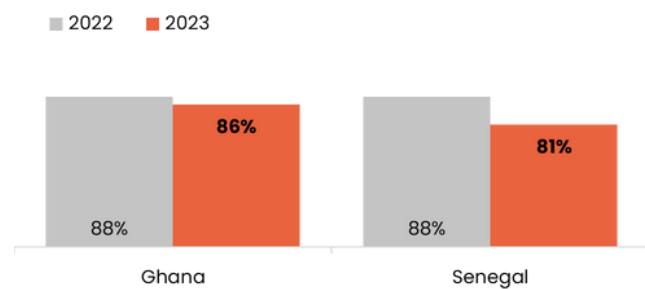
> **Feedback is crucial for excellent client care. It makes clients aware that they have a voice through the feedback. It brings everything we do together."**
>
> **– Clinic manager, MSI Ghana**

Implications and next steps

The development of **effective client feedback resources for MSI country programmes relied heavily on technology.** While teams will still require flexibility in how they implement feedback solutions to ensure they meet client needs, the use of a digital feedback form and the integration of all feedback options with MS Power BI have been crucial in strengthening the collection and use of feedback data. Technology has also ensured that feedback options are as accessible as possible for most clients. Despite early concerns from MSI teams about the suitability of a digital option, **the simple, visual, tablet-based feedback form works well for most clients across MSI settings**. The option to provide feedback via the MSI contact centre also ensures clients who would prefer to speak to someone are catered to.

Feedback options need to be communicated effectively to clients to build their understanding of their rights and options to provide feedback. Staff intervention in the completion of feedback should be minimised. Analysis suggests that the most reliable data from the pilot phase came from settings where clients were provided a discreet space to provide feedback, in their own time.

A simple, short set of client-friendly, globally standardised questions helps generate reliable and usable client feedback insights. Leveraging industry-standard metrics and those collected through other MSI data sources allows teams to monitor trends over time, make comparisons between sites, teams and providers, and benchmark their results against sector and MSI standards. Open comments, and the option to re-contact consenting clients, enable teams to dig deeper into the reasons behind the trends they see in the key metrics.

Ongoing quality assurance of feedback data will require attention. The insights from this evaluation suggest that feedback collected during the pilot phase was largely reliable for most programmes. The analysis also suggests that some of the feedback data can itself be used to monitor quality by checking for significant changes over time (e.g. in the proportion of those giving feedback who consent to be re-contacted) or through comparisons with other data sources (e.g. comparisons of client age profile). Further data validation could be achieved through follow-up surveys with those who provide feedback and consent to be re-contacted.

Initial and ongoing training is critical for creating the right feedback culture. The success of feedback mechanisms is heavily reliant on frontline teams understanding and being supportive of any new feedback mechanisms. While approaches can be designed to be as client-led as possible (i.e. requiring minimal or no intervention from an MSI staff member) practically, MSI teams have a huge role to play in supporting the successful collection and use of feedback. Engagement with feedback as a priority needs to start with the MSI support office, but practical participatory training and ongoing discussions about feedback can help ensure success. If actions to improve client experience are to be fully supported, prioritised and resourced by MSI teams, client feedback metrics also need to be discussed and monitored alongside other service delivery measures e.g. service uptake and reach.

Next steps for MSI

Beyond the initial pilot, 12 MSI country programmes are now already using, or have committed to using, the new toolkit in 2024. Further roll-out since the initial pilot has included exploring the use and scale-up of the remaining feedback options including the SMS option, the use of the MSI contact centre, and making the digital feedback form available directly to clients via QR code. Learnings from these efforts are being used to strengthen the options available to MSI programmes in terms of how they operationalise the feedback tools included in the global toolkit.

Insights from the initial pilot have been integral to refining key elements of the feedback resources, including the guidance provided to MSI teams on managing the devices hosting the digital feedback form and improvements to data quality assurance and visualisation in MS Power BI. A more systematic process for data validation is also being explored.

Building on the success of these resources at improving feedback in MSI family planning programmes, versions of the digital feedback form and data hub have been created for MSI's maternity hospitals.

As well as country-level analysis of feedback data to inform service quality improvements, at the global level we are committed to understanding the longer-term impact of effective client feedback mechanisms on client experience and the expansion of access to services through word-of-mouth referrals.

MSI will continue to bring to life our commitment to listening to our clients and ensuring the care we deliver is client-centred, compassionate and fit-for-purpose.

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