



Quality Improvement in Health Care

ANNUAL REPORT
1ST JULY 2018 – 30TH JUNE 2019

Making health care safer and better



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FROM THE CHAIR



“COHSASA has for the last 24 years espoused the values of commitment to quality, professionalism and passion for excellence.”

**SHARON SLABBERT
CHAIR**

The Council for Health Services Accreditation of Southern Africa NPC (COHSASA) has for the last 24 years espoused the values of commitment to quality, professionalism, and passion for excellence. The Board Members and personnel have shown true dedication to COHSASA's mission of assisting developing countries achieve excellence in healthcare by delivering quality services in a sustainable manner. COHSASA does this by consistently adhering to internationally accredited standards, rigorous patient safety reporting and monitoring systems and operational research.

Jacqui Stewart, our CEO, and her team have once again shown unwavering commitment to COHSASA in the last year. It is no small feat that Ms Stewart received several international accolades during the last year. In June 2019 it was announced that she had been elected to the International Academy of Quality and Safety in Health Care (IAQS), established by the International Society for Quality in Health Care (ISQua), to recognise distinguished individuals who have made a significant contribution in the field of quality and safety in healthcare. This membership is for life.

Ms Stewart was one of the Commissioners on the South African Lancet National Commission on High Quality Health Systems which produced the seminal report “Confronting the Right to Ethical and Accountable Quality Health Care in South Africa”. She is an ISQua Expert; currently serves on the ISQua Board and is a member of the Board and the Accreditation Council of the ISQua External Evaluation Association (IEEA). Furthermore, she was chosen as one 100 Most Impactful Healthcare Leaders by the World Health and Wellness Congress for 2019.

The board was delighted that COHSASA has been accredited by ISQua for the fifth time, a remarkable achievement and the only accreditation body to be so accredited on the African continent. The new set of Healthcare Facilities Standards First Edition was also accredited. Thank you to the staff for their hard work to ensure that COHSASA maintains its important IEAA accreditation.

COHSASA is privileged to be co-hosting the 2019 International ISQua conference in Cape Town. The CEO and I have served on the Planning and Programming Committee for the conference which promises to be an outstanding event.

To date, since operations began in 1995, 613 Full Accreditation awards have been given to 275 healthcare facilities across Africa by COHSASA. In total, 844 awards (including Graded Recognition Accreditation awards¹) have been handed out in the past 24 years. In the year under review, the COHSASA Board handed out 49 Full Accreditation awards. Of these, 26 were four-year accreditation awards which indicates that a culture of continuous quality improvement has been established in many of the facilities. They are opting to persevere with accreditation for the long haul.

Members of the Technical Committee spend many hours reading reports in preparation for the meetings and diligently participate so that the board is well informed about accreditation decisions. Thanks to them. We welcome new directors who provide us with a new insight and my thanks go to all the directors and personnel for their continued support and dedication to COHSASA.

¹ For an explanation of these, please see <http://cohsasa.co.za/approach-2/>

ABOUT US

Our Vision

To be the leading, internationally recognised healthcare quality improvement and accreditation organisation.

Our Mission

To assist healthcare facilities in developing countries to deliver quality health care through sustained improvement, using internationally recognised standards, patient safety principles and operational research.

Values

The following values inform and inspire COHSASA's activities, defining who we are and how we operate:

- Grounded in Africa
- Teamwork
- Commitment
- Professionalism
- Social responsibility
- Equity and diversity
- Value for money

Our Four Strategic Aims

1. Build on existing programmes and their success
2. Develop more interventions for improving quality and safety
3. Grow new business opportunities; diversification
4. Maintain and develop strategic partnerships

A WORD FROM THE CEO



“I recognise the importance of building alliances and partnerships.”

JACQUI STEWART
CEO OF COHSASA

The 2018 – 2019 financial year gave us plenty of challenges and many opportunities. We have continued the strategy of building up alliances and partnerships with like-minded organisations. We strengthened our relationship with the Africa Institute of Healthcare Quality, Safety & Accreditation (AfHQSA) in Ghana by appointing Dr Gilbert Buckle, the Executive Director to the COHSASA Board. We continue to explore opportunities to diversify the services that we offer. For the first time we have worked with Frail Care units and hope that this area can expand with more focus on care for older people. In September COHSASA hosted a study tour for the Registrar of the Health Facility Regulatory Authority in Ghana.

In September COHSASA underwent its fifth organisational survey by the ISQua External Evaluation Association (IEEA). Three surveyors from Denmark, Jordan and Australia were onsite for five days. My team made me very proud as each unit responded to the questions of the surveyors. In December we got the good news that COHSASA had achieved its fifth successive organisational Accreditation Award. Our new suite of health care facilities standards for inpatient care and ambulatory care were also accredited for four years.

As an institutional member of the Board of ISQua, I have had the opportunity to interact more closely with international colleagues and other external evaluation organisations. ISQua moved its International Accreditation Programme to the ISQua External Evaluation Association in Geneva and I serve on the Board and the Accreditation Council of the IEEA. In October I travelled to the ISQua conference in Kuala Lumpur. March was the face-to-face ISQua Board Meeting in Dublin and in May the IEEA Accreditation Council met in Geneva, when we had the opportunity to meet with senior officials from the World Health Organisation.

The highlight of the ISQua conference in Kuala Lumpur was on the last day when we had to say ‘welcome to Cape Town’ as Malaysia handed over the responsibility for the next ISQua conference to Africa. I was delighted that colleagues from Botswana, Ghana, Malawi, Uganda, Democratic Republic of Congo, South Africa, Nigeria, Tunisia and Zimbabwe joined me on stage to beat the drum for Africa and dance to Waka, Waka – this time for Africa. Suddenly the fact that the ISQua conference will be in Cape Town in October 2019 felt like a reality and COHSASA is duly proud to be the co-host of this prestigious conference in Africa – for the first time in 36 years.

The preparations for the conference started in earnest with our Chairperson being the co-chair of the programme planning committee. I chaired the local organising committee with great support from the platinum sponsor Mediclinic. The ISQua events team came to Cape Town in April for a site visit and they were very happy with the quality of venue and accommodation that Cape Town has to offer. To promote the conference, I attended the Africa Health Business Symposium in October in Johannesburg and spoke at regional conferences in Accra and Lagos in June. We had a strong corporate presence at the Africa Health Conference in Johannesburg in May, where I chaired the Quality Management Conference for the third successive year. This time it was held over two days which enabled us to run masterclasses and have presentations and panel discussions. The feedback from the delegates was very positive. We had both a COHSASA stand and an ISQua stand at the exhibition.

I continued as a member of the Lancet National Commission on High Quality Health Systems and with other commissioners was proud when the final report was published in March. We trust this will make a meaningful contribution to the discourse on the ethical and accountable improvement of the quality of South Africa's health services and ultimately the health of our nation.

COHSASA signed a three-year memorandum of agreement with the economics division of Stellenbosch University, Imperial College London and Insight Actuaries and Consultants to enable more academic research on quality improvement and accreditation. We do this with a view to more objectively demonstrate the benefits of the programmes that we offer.

We end the year on a positive note with some new contracts, new team members and a positive financial position and look forward to growing this in the next year.

HIGHLIGHTS OF THE YEAR

An indisputable highlight of the year was COHSASA's involvement in the ISQua conference in Kuala Lumpur. COHSASA received wide coverage in the run-up to hosting the next international conference in Cape Town. A highly energetic, drum-filled parade filled the stage for the closing plenary to celebrate the ISQua conference's first appearance in Africa. Welcoming delegates to Africa, the CEO of COHSASA, was resplendent in bright red "Umbhaco", the traditional outfit worn by Xhosa people in South Africa. She managed to persuade a sizable number of volunteers to dress up, dance and drum their way through - most appropriately - Shakira's famous 2010 FIFA World Cup Song - "Waka Waka" (This Time for Africa).



Jacqui Stewart (5th from the left) and African colleagues from Nigeria, Tunisia, Namibia, Uganda, the DRC and Botswana announce in Kuala Lumpur that the next 36th ISQua conference will be in Cape Town. Jacqui is clutching Pumza the Penguin, the mascot for Cape Town 2019.



The towering Petronas Buildings which dominate downtown Kuala Lumpur.



Above: Lerisha Mudaliar of the Cape Town Convention Bureau talks to potential delegates at the #CapeTown2019 stand in Kuala Lumpur. Left: Elom Otchi, Technical Director of the Africa Institute of Healthcare Quality Safety & Accreditation (AfHQSA) helped drum the next ISQua conference into being. He is photographed with the CEO of COHSASA, Jacqui Stewart, in resplendent Xhosa traditional wear.

COHSASA hosted the Quality Management Conference at the Africa Health Exhibition and Congress at Gallagher Estate on 29 and 30 May 2019. The two-day conference was chaired by COHSASA CEO, Jacqui Stewart, and featured masterclasses from experts all over the world. The two-day Quality Management conference (up from a one-day event last year) was a packed-out success. Nobody left, not even in the death-throes of the last afternoon. COHSASA also hosted a stand at Africa Health and manned the ISQua stand next door. The main promotion was to encourage registration for ISQua's Annual Conference in Cape Town.



Jacqui Stewart (left above) opens the Quality Management Conference at Africa Health 2019. Speakers included (from left): Gilbert Buckle, Grace Kiwanuka, Jacqui Stewart, Garth Hankey, Nino Dal Dayanghirang, Lauren De Kock and Pat O'Connor.



A section of the large crowd at the Quality Management Conference.



Jacqui Stewart promotes the Cape Town conference at the ISQua stand at Africa Health.



One of the speakers at the conference, Gilbert Buckle and a member of the COHSASA Board.

AWARDS

True to form, our largest and one of the most committed clients to accreditation, Mediclinic Southern Africa, managed to ensure that three Mediclinic hospitals in the Western Cape received Katrin Kleijnhans Quality Trophies from COHSASA.

The Katrin Kleijnhans Trophy was instituted by COHSASA. It is awarded to an individual, a unit, a department or a discipline in a healthcare facility that has made the most impressive or substantial contribution to quality improvement during the COHSASA accreditation process. The recipient is not selected by COHSASA but chosen by an appropriate authority at the healthcare facility.

The 22-cm glass trophy honours the memory of COHSASA colleague, Dr Katrin Kleijnhans, who died in 2016 after a long illness. It is intended that the trophy carry forward her legacy and commemorate the enormous contribution that Dr Kleijnhans made to improving of the quality of health care in Africa.

The long-term goal of the award is that it becomes an annual internal floating trophy, given to a deserving recipient at the facility.

First up was Mediclinic Paarl. The Hospital Manager, Jeanine Visser, presented the trophy to the TSEBO Housekeeping Team in April 2019. Sr Riëtte Miller, the Unit Manager of Theatre, was the joint recipient of the Award.



From left: Members of the TSEBO Housekeeping Team Chernay Hildebrandt (Contract manager); Margaret Williams; Brenda Jacobs; Ferensia Boer; Jermaine Solomons; Mariëtte Anthony; Naomi Magonga and Lillian Dirks.



Then it was the turn of Mediclinic Vergelegen which handed out the Katrin Kleijnhans Trophy on 25th April 2019 along with several other achievements by hospital staff. Michelle Zietsman, Learning and Development Facilitator, received the Katrin Kleijnhans trophy for her sterling work in implementing the quality improvement and accreditation process at the hospital.

The quality improvement gatekeepers at Mediclinic Panorama for clinical and administrative services were recognised for their work in quality and patient safety when they were rewarded at a short ceremony, organised by the hospital manager Riaan Vorster, at the hospital in May 2019.



Staff at Mediclinic Panorama who were awarded the Katrin Kleijnhans trophy for improving quality in 2019 were (from left): Miss Mimi Mokgothu, Deputy Nursing Manager and Monique Leendertz-Lang, Support Services Manager. With them (centre) is Jacqui Stewart, the CEO of COHSASA.



By popular selection, COHSASA's employee of the year (2018-2019) was Cathy Duddy, at the time COHSASA's Standards Development Coordinator and now our Professional Development Coordinator.



COHSASA staff enjoyed an alfresco lunch at The River Club in Observatory to celebrate the closing of the office at the end of a very busy 2018 for the Christmas break.

OUR PROGRAMMES

The Council has programmes for quality improvement, accreditation and patient safety. There is a strong focus on building local capacity in all the programmes.

Quality Improvement and Accreditation

The quality improvement and accreditation programmes are standards-based and focus on the systems and processes that are required in healthcare facilities to enable the personnel to operate optimally. The programmes are tailored to meet the needs of the clients, depending on where they are starting on their quality journey and how long it may take them to achieve accreditation. Some clients enter a self-evaluation programme after they have received initial training and had a baseline survey conducted to give them an objective, accurate evaluation of their situation in terms of compliance with the standards

The self-evaluation programme is supported by the COHSASA web-based quality information system, CoQIS. The clients are trained to capture the standard compliance data and develop quality improvement plans in CoQIS, which they can then monitor and manage as they progress in the programme.

Other clients need more support to start the quality improvement programme and have more onsite visits from our quality advisers, who guide and assist the

healthcare team to develop the skills they need to implement and manage their quality improvement activities.

A hybrid programme enables clients to carry out self-evaluation of their standard compliance and quality improvement activities as well as receive onsite support visits, until they are confident that they can assess their standard compliance accurately and implement effective quality improvement projects.

When the client organisation is confident that they have implemented all the requirements of the programme and embedded improvement thinking into all their activities, they can schedule an external evaluation survey. This is carried out by a different team from the one which provided support for the quality improvement programme.

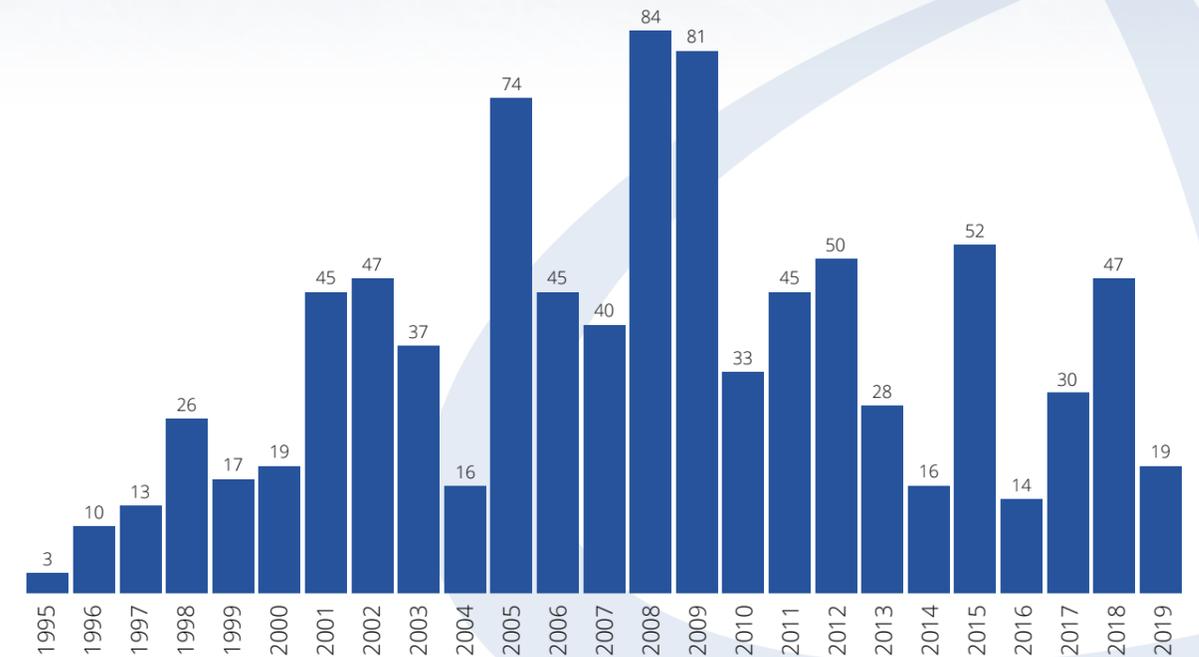
Patient Safety

The Council developed a web-based incident reporting, monitoring and management system called PatSIS. Incidents are reported by facility personnel through a call centre staffed by nurses, who capture all the details of the incidents into PatSIS. As soon as an incident is captured the relevant staff at the facility are notified so that they can begin a full investigation. If the incident is very serious a text message is sent to senior management and designate personnel. Selected personnel within the organisation are trained to use PatSIS to monitor and manage the incidents and to ensure that there is learning from each adverse event or near miss to reduce the chance of reoccurrence.

ACCREDITATION AWARDS

History of accreditation and graded recognition awards per year

(1995 to 2019 = 891 decisions across 444 facilities)



Healthcare facility accreditation is our core business. During the past financial year, a total of 59 facilities were presented to the COHSASA Technical Committee and Board for a decision on their accreditation status.

- 49 received Full Accreditation of which:
 - 11 received 2 years' Full Accreditation
 - 12 received 3 Years' Full Accreditation
 - 26 received 4 Years' Full Accreditation
- 1 received Graded Recognition at Entry Level

Five facilities were found to comply with the accreditation standards post accreditation during interim surveys. These surveys are conducted halfway through a four-year accreditation award to investigate whether standards are being maintained.

FULL ACCREDITATION AWARDS

Client Name	Facility Name	Number of Facilities
Alliance Care (PTY) LTD, Durban, South Africa	Alliance Care Sub-Acute Rehabilitation Hospital	1
Arwyp Medical Centre (PTY) LTD, Kempton Park, South Africa	Arwyp Medical Centre (PTY) Ltd	1
City of Cape Town, South Africa	Bellville Environmental Health Office	15
	Durbanville Environmental Health Office	
	Fezeka Environmental Health Office	
	Khayelitsha Environmental Health Office	
	Kraaifontein Environmental Health Office	
	Kuilsriver Environmental Health Office	
	Lakeside Environmental Health Office	
	Maitland Environmental Health Office	
	Milnerton Environmental Health Office	
	Mitchells Plain Environmental Health Office	
Parow Environmental Health Office		
Plumstead Environmental Health Office		
Silvertown Environmental Health Office		
Strand Environmental Health Office		
Wynberg Environmental Health Office		
Cure Day Clinic Holdings (Pty) LTD, South Africa	Cure Day Hospitals Fourways	1
Hospice Palliative Care Association of South Africa (HPCA)	Franschhoek Hospice	3
	Knysna/Sedgefield Hospice	
	Living Hope Health Care Centre	
Lady Pohamba Private Hospital, Windhoek, Namibia	Lady Pohamba Private Hospital	1
Lily Hospitals Limited, Warri, Nigeria	Lily Hospital Limited	1
MedAhead@Wilgers, Pretoria South Africa	MedAhead@Wilgers	1

Client Name	Facility Name	Number of Facilities
Mediclinic, Southern Africa	Mediclinic George/Geneva	12
	Mediclinic Heart Hospital	
	Mediclinic Kimberley	
	Mediclinic Kloof	
	Mediclinic Limpopo	
	Mediclinic Newcastle	
	Mediclinic Paarl	
	Mediclinic Panorama	
	Mediclinic Pietermaritzburg	
	Mediclinic Vergelegen	
	Mediclinic Welkom	
	Mediclinic Windhoek	
Botswana Ministry of Health and Wellness	Airstrip Clinic (Mahalapye Hospital)	8
	Donga Clinic	
	Extension 2 Clinic	
	Mahalapye Hospital	
	Phuthadikobo Clinic (Scottish Livingstone Hospital)	
	Scottish Livingstone Hospital	
	Selebi Phikwe Government Hospital	
	Xhosa 1 Clinic (Mahalapye Hospital)	
Reddington Multi-Specialist Hospital, Lagos, Nigeria	Reddington Multi-Specialist Hospital	1
Tsepong (PTY) Limited, Lesotho	Likotsi Filter Clinic	4
	Mabote Filter Clinic	
	Qoaling Filter Clinic	
	Queen Mamohato Memorial Hospital	

OUR BOARD



Chair

Ms Sharon Slabbert



Dr Nicole Speaker

Quality Director of the PharmAccess Foundation and Managing Director of SafeCare, based in Amsterdam the Netherlands.



Vice Chair

Professor Gert J van Zyl

Dean of the Faculty of Health Sciences at the University of the Free State (UFS)



Professor Ethelwynn Stellenberg

Associate Professor of Nursing in Department of Nursing and Midwifery at the University of Stellenbosch: Quality Management and Regulation, Co-ordinator Masters Programme, Risk Management in Health care



Professor Erwin Schwella

(Immediate past Chair)

Professor of Public Leadership Stellenbosch and Tilburg Universities. Disruptive Social Innovator. (Resigned 24th August 2018)



Dr Gilbert Buckle

Founding Member of The ISQua Academy of Quality and Safety in Health Care (IAQS)



Ms Madelein Mkuu

Founder and President of Leading Women of Africa (LWA) and Director of LWA-Corporate Investment



Dr Sibusiso Zuma

Technical Advisor Primary Health Care FHI 360

OUR SENIOR MANAGEMENT TEAM

COHSASA has five functional units which support our external and internal clients. These functional units are Quality Improvement, Information and Communication Technology, Administration and Support, Business Development and the Survey Unit. The Senior Management Team comprises the unit leads, the HR and Quality Assurance Manager and the Communications Manager.



CEO, Business Development Lead

Jacqui Stewart

Jacqui Stewart joined COHSASA as the Chief Operations Manager in 2005, she was appointed Interim CEO in January 2015 and was appointed as Chief Executive Officer of COHSASA in April 2016. She heads up the Business Development Unit which includes marketing, communications and research.

She qualified as a nurse in Cape Town and specialised in cardiothoracic nursing in London before moving into quality improvement, service development and managerial posts in the English NHS. Prior to joining COHSASA she was a director at the NHS Modernisation Agency, Leadership Centre and interim director at the NHS University. She has a degree of Master of Professional Studies Health from Middlesex University, London.



Survey Unit Lead

Giel van Schalkwyk

Dr Giel van Schalkwyk has been the Chief Surveyor at COHSASA for 21 years, managing the external surveys for all types of healthcare facilities. He developed and leads the training programme for healthcare surveyors and actively contributes to the development of the accreditation standards. He has taken part in more than half of the accreditation surveys conducted by COHSASA to date.

Giel qualified as a medical doctor in 1983 and worked as a general practitioner until 1991 when he moved into administration and management in both provincial and national government organisations where he was responsible for a range of healthcare programmes. He has a MMed in Family Medicine.



Quality Improvement Unit Lead

Leonard Londa

Dr Leonard Londa leads the Quality Improvement Unit and oversees the team of Quality Advisors. He obtained his medical degree at Lubumbashi University in DRC in December 2008 and thereafter worked at the academic teaching hospital in Lubumbashi.

In October 2010, he worked as a medical officer at the Maluti Adventist Hospital in Lesotho and then as the South Region programme manager and the Clinical and Quality Assurance Officer and Master Trainer at JHPIEGO, an affiliate of John Hopkins University, in Lesotho.



Information & Communication Technology Lead

Mtisunge Chiotha

Mtisunge Chiotha leads the ICT unit, which comprises informatics, knowledge management, the data section and the CoQIS Helpdesk. The team provides system support, information management, client support and feedback. The team responds to both internal and external client needs.

Mtisunge holds a BSc (Hons) in Computing and Information Technology from the London Metropolitan University. Prior to joining COHSASA in 2010, she worked for a Software Engineering company as an Applications Support Engineer.



Administration and Support Lead

Elsa Wiehman

Elsa Wiehman heads up the Administration and Support Unit which incorporates all the internal corporate support services.

She started her career in banking and then moved into private bookkeeping and accounts with a large accounting and auditing company. She worked at COHSASA from 1999 to 2004 and left to broaden her experience. She returned to COHSASA in 2010 as the Accounts Manager.



HR and Quality Assurance Manager

Helena Tredoux

Helena Tredoux has been the Human Resources and Quality Assurance Manager since 2009. She ensures that COHSASA fully complies with all employment related legislation. She is responsible for coordinating the maintenance of the International Society for Quality in Health Care (ISQua) organisational standards company-wide. Helena qualified in Human Resources Management in 2003 and has held several human resources positions since. Her experience includes HR/ Business Analysis in corporate banking. She has a BA Psychology, BA Psychology (Honours) and NDip in Human Resources Management.

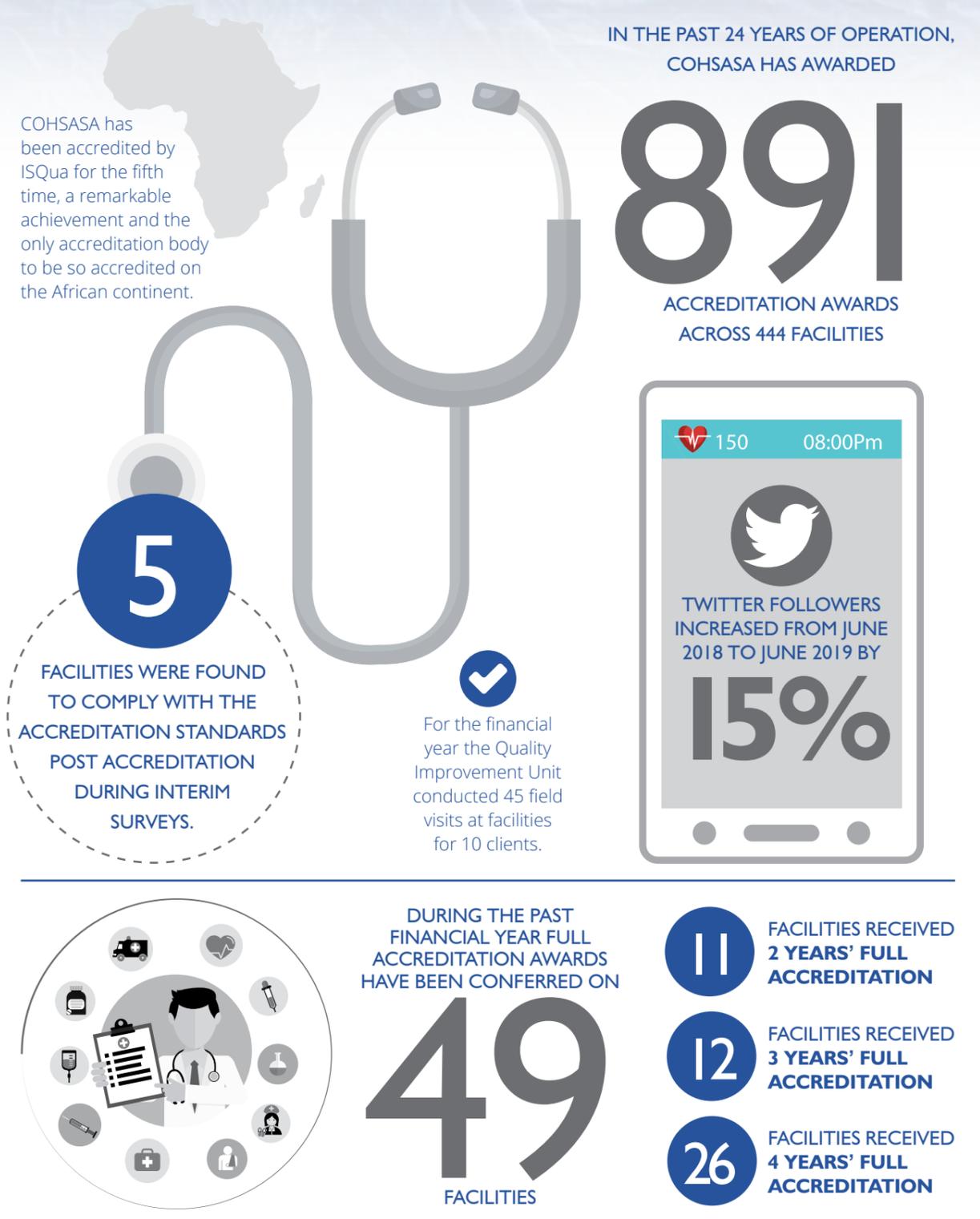


Communications Manager

Marilyn Keegan

Marilyn Keegan studied for a BSc nursing degree at the University of the Witwatersrand and has a BA in Communications and a BA Hons in English literature. She was the health reporter for the Rand Daily Mail. As an award-winning journalist, she has a wide knowledge and understanding of media and has been a senior writer for several national newspapers and magazines in South Africa. Marilyn joined COHSASA in 2000 and is responsible for corporate communications, including the management of the company website, media relations, publications, photography and social media.

SUMMARY INFOGRAPHIC



ACTIVITIES IN THE PAST YEAR



Quality Improvement Unit

The unit is responsible for the implementation of client contracts: for introducing the accreditation standards, quality improvement methods and patient safety systems to healthcare facility personnel. The unit is responsible for the professional development for both clients and COHSASA personnel.

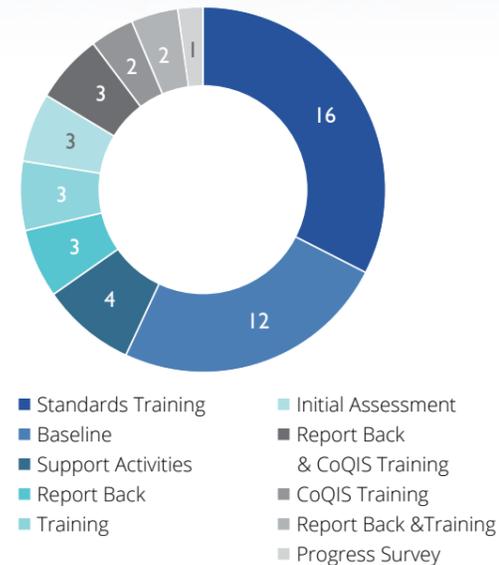
The Quality Advisors carry out a range of activities as agreed with the clients including:

- training healthcare facility personnel on the accreditation standards and quality improvement methods;
- conducting baseline surveys when compliance with the accreditation standards is assessed;
- reporting back the baseline survey results to the client and guiding facility personnel on how to manage identified deficiencies using quality improvement methodologies;
- training facility personnel to use the COHSASA Quality Information System, CoQIS, to monitor and manage their quality improvement programme;
- support visits to guide and mentor facility personnel during the contract period;
- reviews of the clients' self-evaluation data that is captured into CoQIS at regular intervals during the contract period;
- conducting progress surveys as requested by clients to determine the facility's level of compliance with the standards;
- Training facility teams on patient safety including reporting and managing incident using the PatSIS system;
- The emphasis is on learning and changing behaviour to decrease the probability of errors. The number of incidents reported in the period under review was 1003. A total of 18219 incidents have been recorded in PatSIS between January 1, 2013 and June 30, 2019.

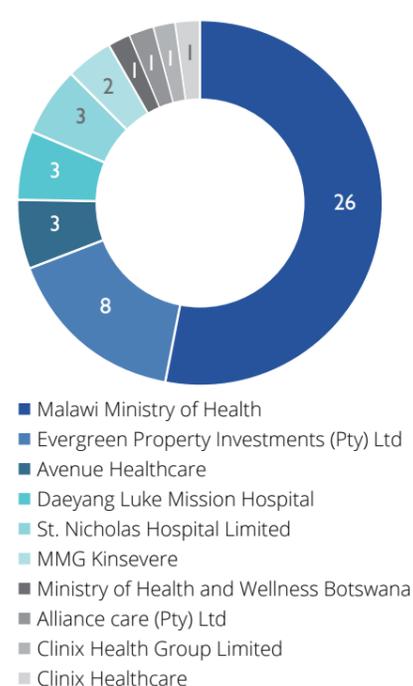
For the financial year 01 July 2018 – 30 June 2019 the Quality Improvement Unit conducted 45 field visits at facilities for 10 clients.

- 45 activities at 21 healthcare facilities across 10 clients
- Four activities related to Ministries of Health

Quality Improvement activities per type (49)



Quality Improvement activities per client (49)



The Survey Unit

This unit is responsible for conducting external (accreditation) surveys of healthcare facilities in the COHSASA accreditation programme. The unit team trains potential COHSASA surveyors as well assessors for countries for which COHSASA has developed national standards. In February 2019 eleven new independent surveyors were trained and they are in the process of being deployed.

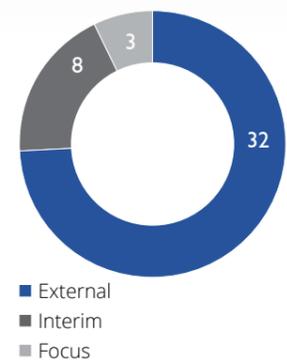
The unit carries out inspection and assessment activities for third-party clients.

COHSASA is contracted by the Board of Healthcare Funders (BHF) to carry out inspections of new or upgraded private healthcare facilities. Likewise, it is contracted by Turner Townsend, the Independent Monitor of the contract between the Government of Lesotho and the Tsepong Group, to monitor the implementation of the contract for operating the Queen Mamohato Memorial Hospital and three filter clinics in Lesotho.

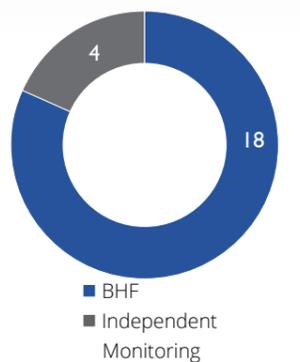
For the financial year 01 July 2018 to 30 June 2019, the survey unit conducted 43 surveys for 13 clients of which 32 were accreditation (external) surveys. A total of 22 inspections were carried out at 23 facilities on behalf of three third-party clients.

The unit is also responsible for the review and maintenance of existing standards and the development of new standards

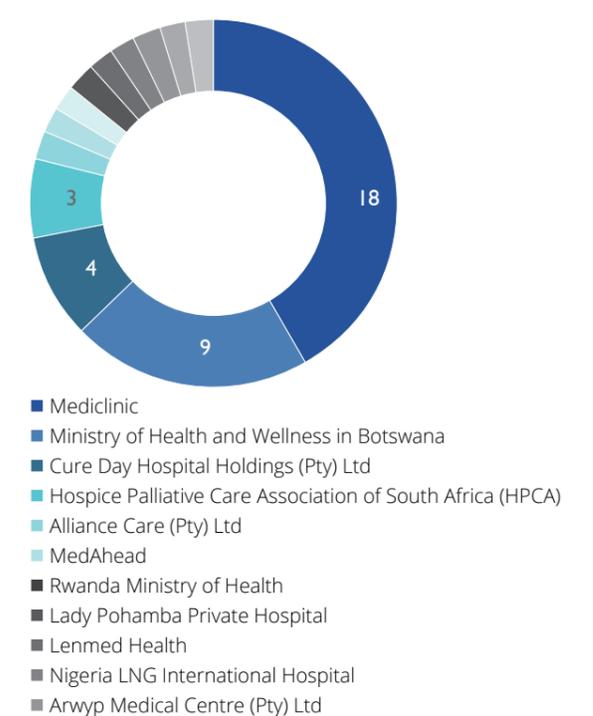
Survey activities per visit types (43)



Third-party client activities per type (22)



Survey activities per client (43)





Standards Development

The following standards have been reviewed, developed or are work in progress:

- The final versions of the sets of Healthcare Facility Standards, First Edition were provided to ISQua on 30 July 2018 and were successfully accredited for a four-year period from December 2018 – December 2022. These two sets of standards: one for inpatient care and one for ambulatory care form the basis on which future COHSASA standards will be developed.
- The Botswana Ministry of Health and Wellness commissioned COHSASA to develop quality standards for various private practice healthcare facilities. The work was prioritised over three years. The third, and final, phase of this work began in February 2018 and was completed in February 2019. It consisted of the development, piloting and finalisation of standards for eye care, dental care, hospice and palliative care, occupational health and nephrology and urology.
- Universal Interim Survey Standards were developed to enable all healthcare facilities to be assessed on the same set of interim standards. A distinction was made between the standards that are used for onsite surveys and for those that are used for the submission of interim reports. Interim surveys/

reports ensure that standards are maintained between external surveys, particularly for facilities that have been accredited for a full four years.

- Finalisation of the development of National Standards for Hospitals and Primary Healthcare facilities in Namibia was completed in May 2019.
- As part of the development of an accreditation system for the Ministry of Health and Family Welfare in Bangladesh, COHSASA was requested to assist in assessing and revising the existing National Bangladesh Healthcare Standards to ensure that they are measurable and, if possible, comply substantially with the ISQua requirements. Extensive preliminary work was undertaken from August 2018 beginning with a review of the healthcare system and existing standards. The standards were analysed, presentations prepared, and road-mapping and technical working group workshops were planned. The planned workshops did not, however, take place due to conflicting operational requirements in Bangladesh.
- An in-depth technical report was compiled that reviewed examples of existing accreditation tools and proposed a method to leverage these tools to develop a new and robust healthcare facility accreditation system for Uganda.



Business Development

Generating new business has been a priority during the last year, in the traditional fee-for-service contracts used by COHSASA and in seeking new partnerships for both local work and for donor-funded programmes in Africa and other low- and middle-income countries. Opportunities to diversify the products offered by COHSASA are being explored. There is emphasis on expanding the work we do to assist healthcare facility teams to improve their services overall and embed improvement thinking into all that they do.

Strategic Communications play an important role in COHSASA's business to ensure our stakeholders are informed and kept up-to-date with the work of the

organisation. We publish the stories and successes of the accreditation programme and the names of organisations participating in the quality improvement programme as recognition of their commitment to quality.

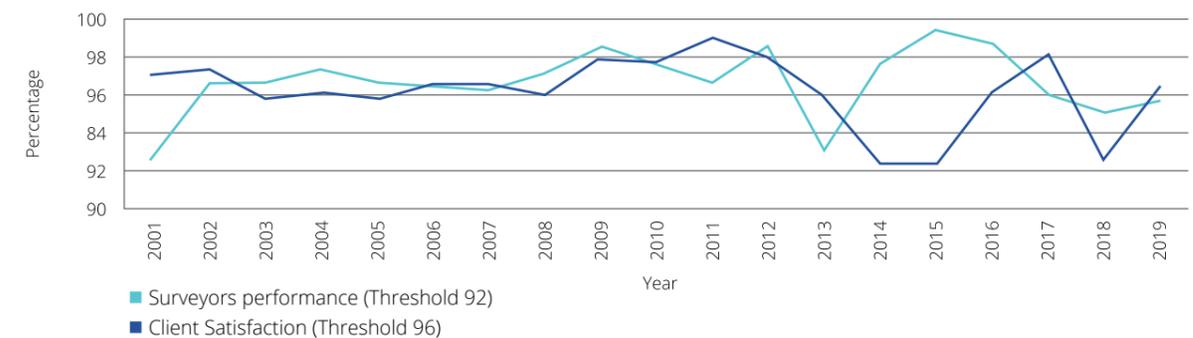
The focus has been to raise the public profile of COHSASA and an indicator of success was the heightened use of social media and the use of video material for messaging. Organic website traffic grew 27.04% year-on-year. Twitter followers increased from June 30, 2018 to June 30, 2019 by 15%. A total of 19 of the 124 queries in the last half of the financial year (January to June 2019) concerned queries about quality improvement and accreditation.



Monitoring operational activities

A balanced score card system is being maintained within the Survey Unit to monitor operational activities and key performance areas monthly. The two core performance aspects are client satisfaction with the execution of accreditation survey-related activities and

the surveyors' adherence to, and performance against, survey-related protocols. The graph below depicts the unit's performance in relation to these two aspects for accreditation surveys since 2001. The indices indicate a stabilisation of performance levels above the thresholds of 96 and 92 percent respectively.



Administration & Support

Office management & logistics

Maintaining the day to day functions of the organisation is a joint effort between the finance, reception, maintenance and housekeeping team. Transporting our personnel safely and cost effectively around the continent – and the world – is the responsibility of the travel coordinator.

Human Resources & Quality Assurance

Our personnel are our most prized asset and thus the Human Resources Department plays an important role in ensuring the success of COHSASA. The HR manager provides strategic human resource advice on learning and development, workplace equity and diversity, performance management, developing policies and practices and personnel policies. The Department ensures that COHSASA is compliant with labour

legislation. It is also responsible for coordinating and maintaining the standards for ISQua accreditation.

Finance

The Council for Health Service Accreditation of Southern Africa NPC, a registered Non-Profit Company in terms of the Companies Act No. 71 of 2008, has a robust, well-defined governance system with sound financial controls in place.

The External Auditors have issued an unqualified opinion that the 2019 Annual Financial Statements are a fair reflection of the Council's activities in the past financial year and accounting practices have been applied appropriately.

A Statement of Financial Position and Auditors' Report are given on pages 23-25. The full set of financial statements are available on request from finance@cohsasa.co.za.

ICT Unit

The ICT unit comprises three sections; network, application and technical support; Helpdesk and Data Bank and Knowledge Management.

The team offers support to all users within our network and remote users. The team ensures that our client-facing systems – CoQIS and PatSIS – are at their optimal functioning capability.

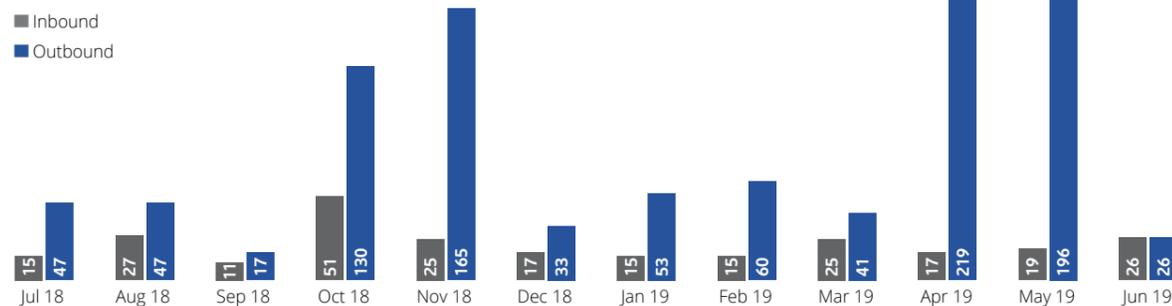
We also ensure that the network and applications are well maintained to minimise downtime.

This year we embarked on an upgrade of PatSIS, our incident reporting and monitoring system for adverse events and near misses, to ensure it meets the needs of our users.

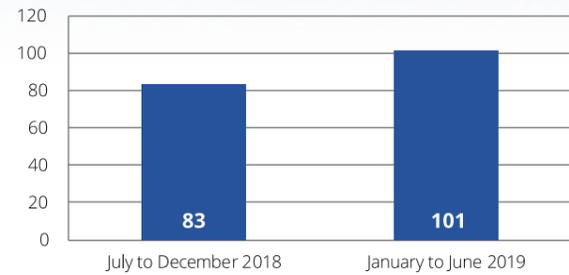
The Helpdesk and Databank Team provide essential support to two important groups – external and internal clients. First, the team trains clients to use CoQIS when they enter the quality improvement and accreditation programmes and assists them with any queries relating to the implementation and monitoring of their programmes. Second, the team supports the Quality Advisors to monitor the clients' self-evaluation programmes and ensure that the Quality Advisors and Surveyors have all the necessary documents when they carry out client visits and external surveys. The team assist clients with queries about the use of CoQIS.

Knowledge Management is a key part of the ICT function. The focus is to make the best use of the information relating to client programmes to ensure they are accurately monitored, and adjustments made as required. It also plays a role in supporting internal clients to monitor and manage activity effectively.

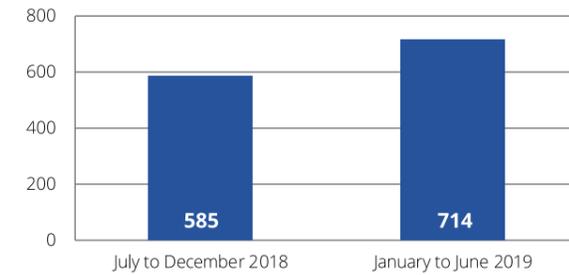
Helpdesk client contact per month (1299)



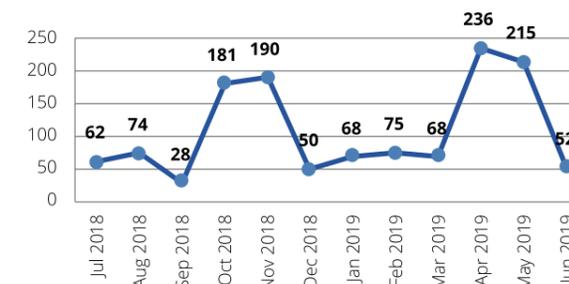
Number of facilities contacted per year



Instances of contact with facilities per year



Instances of contact with facilities per month



FINANCE

Statement of Financial Position as at 30 June 2019

	Note(s)	2018 (R)	2017 (R)
Assets			
Non-Current Assets			
Property, plant and equipment	2	38,926	64,551
Deferred tax	3	97,014	123,570
		135,940	188,121
Current Assets			
Current tax receivable	4	2,242,808	2,775,087
Trade and other receivables		324,517	260,327
Cash and cash equivalents	5	1,021,013	3,500,319
		3,588,338	6,535,733
Total Assets		3,724,278	6,723,854
Equity and Liabilities			
Equity			
Share capital		2,300	2,300
Retained income		2,371,026	1,843,912
Total Equity		2,373,326	1,846,212
Liabilities			
Current Liabilities			
Trade and other payables	6	1,004,472	4,419,271
Finance lease liabilities		-	21,469
Provisions	7	346,480	436,902
		1,350,952	4,877,642
Total Equity and Liabilities		3,724,278	6,723,854

INDEPENDENT AUDITORS' REPORT

To the members of The Council for Health Service Accreditation of Southern Africa NPC

Opinion

We have audited the annual financial statements of The Council for Health Service Accreditation of Southern Africa NPC which comprise the statement of the financial position as at 30 June 2019, and the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the annual financial statements, including a summary of significant accounting policies.

In our opinion, the annual financial statements present fairly, in all material respects, the financial position of The Council for Health Service Accreditation of Southern Africa NPC as at 30 June 2019, and its financial performance and cash flows for the year then ended in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities and the requirements of the Companies Act 71 of 2008.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the annual financial statements section of our report. We are independent of the company in accordance with the Independent Regulatory Board for Auditors Code of Professional Conduct for Registered Auditors (IRBA Code) and other independence requirements applicable to performing audits of annual financial statements in South Africa. We have fulfilled our other ethical responsibilities in accordance with the IRBA Code and in accordance with other ethical requirements applicable to performing audits in South Africa. The IRBA Code is consistent with the International Ethics Standards Board for Accountants Code of Ethics for Professional Accountants (Parts A and B). We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Emphasis of matter

Without qualifying our opinion, we draw your attention to the note on going concern in the directors' report.

Other information

The directors are responsible for the other information. The other information comprises the directors' report as required by the Companies Act 71 of 2008, which we obtained prior to the date of this report. Other information does not include the annual financial statements and our auditors' report thereon.

Our opinion on the annual financial statements does not cover the other information and we do not express an audit opinion or any form of assurance conclusion thereon.

In connection with our audit of the annual financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the annual financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of the directors for the annual financial statements

The directors are responsible for the preparation and fair presentation of the annual financial statements in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities and the requirements of the Companies Act 71 of 2008, and for such internal control as the directors determine is necessary to enable the preparation of annual financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the annual financial statements, the directors are responsible for assessing the company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the annual financial statements

Our objectives are to obtain reasonable assurance about whether the annual financial statements are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with International Standards on Auditing will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken based on these annual financial statements.

As part of an audit in accordance with International Standards on Auditing, we exercise professional judgement and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the annual financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit to design audit procedures that are appropriate in the circumstances, but not to express an opinion on the effectiveness of the company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.
- Conclude on the appropriateness of the directors' use of the going concern basis of accounting and based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditors' report to the related disclosures in the annual financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditors' report. However, future events or conditions may cause the company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the annual financial statements, including the disclosures, and whether the annual financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Theron du Plessis Durbanville Inc.
Chartered Accountants (S.A.)
Registered Auditors
SP de Wet CA (SA) RA
Director

CONTACT DETAILS

The Annual Report can be downloaded from our website at www.cohsasa.co.za.
Direct comments and questions regarding the report to queries@cohsasa.co.za

You can also Tweet us at @COHSASA

The Council for Health Service Accreditation of Southern Africa NPC
13-15 Lonsdale Building
Lonsdale Way Pinelands 7405

P.O. Box 676 Howard Place 7450
South Africa

Tel: +27 (0)21 531 4225

www.cohsasa.co.za

