



THE COUNCIL FOR  
HEALTH SERVICE  
ACCREDITATION  
OF SOUTHERN AFRICA

C O H S A S A

*Quality Improvement in Health Care*

## **ANNUAL REPORT**

1ST JULY 2015 - 30TH JUNE 2016

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**Making health care safer and better**



Leading the transformation of  
healthcare quality and safety globally



## CONTENTS

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<b>A word from the Chair</b> .....	<b>3</b>
<b>About us</b> .....	<b>4</b>
<b>Our Vision</b> .....	<b>4</b>
<b>Our Mission</b> .....	<b>4</b>
<b>Values</b> .....	<b>4</b>
<b>A word from the CEO</b> .....	<b>6</b>
<b>Our programmes</b> .....	<b>7</b>
<b>Accreditation awards</b> .....	<b>8</b>
<b>Summary infographic</b> .....	<b>10</b>
<b>Our Board</b> .....	<b>13</b>
<b>Our Senior Management Team</b> .....	<b>14</b>
<b>Activities in the 2015/6 financial year</b> .....	<b>16</b>
<b>Communications</b> .....	<b>16</b>
<b>Human Resources</b> .....	<b>16</b>
<b>Quality Improvement and Facilitation Unit</b> .....	<b>16</b>
<b>Survey Unit</b> .....	<b>17</b>
<b>Monitoring Quality Improvement</b> .....	<b>18</b>
<b>Helpdesk and Databank</b> .....	<b>19</b>
<b>Standards Development</b> .....	<b>19</b>
<b>PatSIS Call Centre</b> .....	<b>19</b>
<b>ICT</b> .....	<b>19</b>
<b>Finance</b> .....	<b>20</b>
<b>Independent Auditors Report</b> .....	<b>21</b>

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## A WORD FROM THE CHAIR

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The Council for Health Service Accreditation of Southern Africa (COHSASA), a not-for-profit organisation based in Cape Town in South Africa, assists a range of healthcare facilities to meet and maintain quality standards and thereby provide safe, quality services.

In the past 21 years of operation, COHSASA has worked in over 600 facilities in both the public and private sectors in South Africa, Botswana, Swaziland, Lesotho, Namibia, Rwanda, Nigeria, Uganda, Zambia, Tanzania, Ghana, Egypt and Kenya.

January 2015 saw a change of leadership at COHSASA following the retirement of the founding CEO professor Stuart Whittaker after almost 20 years of dedicated service to COHSASA. We will build on his legacy and take COHSASA forward under the direction of the new CEO Jacqui Stewart who was appointed on 1 April 2016.

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PROFESSOR ERWIN SCHWELLA  
**CHAIRMAN**

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In the past 21 years of operation, COHSASA has worked in over 600 facilities in both the public and private sectors in South Africa, Botswana, Swaziland, Lesotho, Namibia, Rwanda, Nigeria, Uganda, Zambia, Tanzania, Ghana, Egypt and Kenya.

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## ABOUT US

### Our Vision

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

### Our Mission

To assist healthcare facilities in Africa and other developing countries to deliver quality healthcare 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 it is and how it operates:

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

### Our Goals

To develop, implement, adapt and improve cost-effective, integrated quality improvement, patient safety and accreditation programmes for public and private healthcare facilities in developing countries.

To maintain ISQua accreditation for COHSASA, its surveyor training programme and selected standards.

To ensure that COHSASA and its programmes are financially and operationally sustainable.

To maintain, protect and continuously upgrade COHSASA information systems to support the COHSASA programmes and operations.

To be recognised both nationally and internationally as a leader in strengthening healthcare delivery systems in developing countries.

To be a recognised research partner in the field of healthcare quality improvement.

To build and maintain sustainable, financially viable partnerships.

To be a professional provider of skills development programmes to support the COHSASA mission and vision.



The CEO of COHSASA, Jacqui Stewart (centre) celebrates a milestone with Kefuoe Qwela (left) and Noleen Davids who have both been employed at COHSASA for 10 years.



The COHSASA offices in Pinelands – a suburb of the beautiful city of Cape Town (left) – in South Africa.





## A WORD FROM THE CEO

COHSASA has achieved global recognition and is the only African health facility accrediting body that is accredited by the International Society for Quality in Health Care (ISQua). Since it achieved its first accreditation award from ISQua in 2002, the Council has maintained its accredited status with three further accreditations. Its current ISQua accreditation status is valid until December 2018.

Two sets of its standards – for hospitals and palliative care – are currently accredited by ISQua and COHSASA's Surveyor Training Programme is accredited by ISQua until 2018.

COHSASA is proud of its ISQua accreditation and committed to supporting the improvement in the quality of healthcare facilities in South Africa and the continent as a whole. I believe that offering accreditation against internationally accredited standards provides a trajectory to excellence to which all healthcare facilities can aspire. As we look forward, the focus is on growing the company and our footprint in Africa and beyond. We will also diversify the services we offer.

**JACQUI STEWART**  
**CHIEF EXECUTIVE OFFICER**

I believe that offering accreditation against internationally accredited standards provides a trajectory to excellence to which all healthcare facilities can aspire.

## OUR PROGRAMMES

The Council has programmes for quality improvement, accreditation and patient safety.

### Quality Improvement and Accreditation

The quality improvement programmes are standards-based and focus on the systems and processes that are required in healthcare facilities to enable the staff 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 are able to 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 projects and 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 on-site visits from our Quality Advisers, who guide and assist the healthcare team to develop the skills they need to manage their quality improvement activities.

The hybrid programme enables clients to carry out self-evaluation of their standard compliance and receive on-site support visits until they are confident that they are able to assess their standard compliance accurately and implement effective quality improvement projects.

### Patient Safety

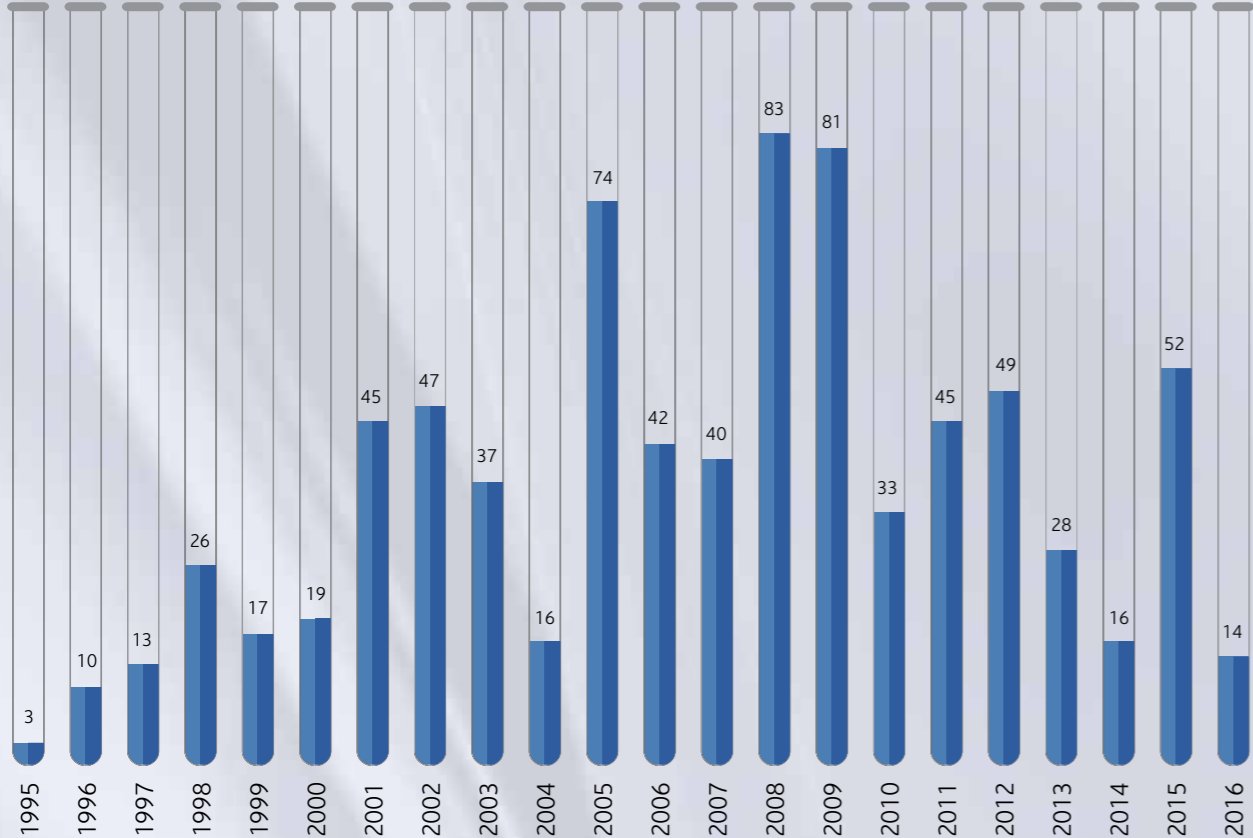
The Council developed a web-based incident reporting, monitoring and management system called PatSIS. Incidents are reported by facility staff through a call centre staffed by nurses, who capture all the details of incidents into PatSIS. As soon as an incident is captured, the relevant staff at the facility are notified so that they can begin a full investigation. If the incident is very serious a text message is sent to the relevant staff and the senior management. The facility staff 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 re-occurrence.

There is a strong focus on building capacity in all the programmes.



# ACCREDITATION AWARDS

**History of accreditation and graded recognition awards per year**  
(1995 to 2016 = 790 awards across 418 facilities)



Healthcare facility accreditation is our core business. During the past financial year, accreditation awards have been conferred on 25 facilities (16 private, seven public, and two not-for-profit):

- Six facilities received two-year full accreditation awards
- Nine facilities received three-year full accreditation awards
- 10 facilities received four-year full accreditation awards

The facilities were in four countries, South Africa (17), Lesotho (four), Botswana (three) and Uganda (one). Airstrip, Phutadikobo and Xhosa Clinics were the first public sector facilities to achieve accreditation in Botswana and the International Hospital Kampala was the first to achieve accreditation in Uganda.

Proud staff from 16 environmental health offices of the City of Cape Town hoist aloft their COHSASA accreditation award certificates in March 2015.



# SUMMARY INFOGRAPHIC

DURING THE PAST FINANCIAL YEAR ACCREDITATION AWARDS HAVE BEEN CONFERRED ON

# 25

FACILITIES

**6** FACILITIES RECEIVED **2 YEARS' FULL ACCREDITATION**

**9** FACILITIES RECEIVED **3 YEARS' FULL ACCREDITATION**

**10** FACILITIES RECEIVED **4 YEARS' FULL ACCREDITATION**

COHSASA WAS AWARDED A SMALL MICRO ENTERPRISE (SME) DISCRETIONARY GRANT

IN THE PAST 21 YEARS OF OPERATION, COHSASA HAS WORKED IN OVER

# 600

FACILITIES IN BOTH THE PUBLIC AND PRIVATE SECTORS IN SOUTH AFRICA, BOTSWANA, SWAZILAND, LESOTHO, NAMIBIA, RWANDA, NIGERIA, UGANDA, ZAMBIA, TANZANIA, GHANA, EGYPT AND KENYA.

COHSASA HAS ACHIEVED GLOBAL RECOGNITION AND IS THE ONLY AFRICAN HEALTH FACILITY ACCREDITING BODY THAT IS ACCREDITED BY THE INTERNATIONAL SOCIETY FOR QUALITY IN HEALTH CARE (ISQua).

DURING THE YEAR A TOTAL OF

# 47

CLIENT VISITS WERE UNDERTAKEN BY THE **QUALITY IMPROVEMENT AND FACILITATION UNIT**

THESE 47 FIELD VISITS INVOLVED

**5**

CLIENT GROUPS ACROSS

**8**

AFRICAN COUNTRIES

COMPLIMENT FOR THE **HELPDESK AND DATABANK:**

"YOU ARE SIMPLY WONDERFUL. A MILLION THANKS. EXCELLENT CUSTOMER SERVICE DELIVERY."



SURVEYOR TRAINING SESSIONS WERE CONDUCTED BY THE **SURVEY UNIT** FOR

**13**

HOSPICE PALLIATIVE CARE ASSOCIATION OF SOUTH AFRICA (HPCA) PERSONNEL,

**2**

NEW COHSASA APPOINTMENTS, AND

**21**

SAFECARE PERSONNEL

COHSASA INTRODUCED A NEW CORPORATE IMAGE

A TOTAL OF

# 20

BHF INSPECTIONS WERE CONDUCTED OF A RANGE OF FACILITIES

## OUR BOARD

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### Chairperson

#### **Professor Erwin Schwella**

Current Professor and former Director of the School of Public Leadership at the University of Stellenbosch.

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### Vice Chairperson

#### **Mrs Sharon Slabbert**

Executive Officer: Health Services Delivery for the Hospital Association of South Africa (HASA)

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#### **Professor Gert J van Zyl**

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

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#### **Mr Albert Ramukumba**

Senior Manager District Hospital Services in Limpopo Province

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#### **Professor Anthony Linegar**

Associate Professor Cardiothoracic Surgery, University Free State and University of Cape Town; Head of thoracic surgery Groote Schuur Hospital; Private Thoracic Surgical and Intensive Care Practice in Cape Town; Senator of the Colleges of Medicine SA.

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#### **Dr Steve Taylor**

Executive Global Group Medical Director – Life Health Care Group

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#### **Dr Nicole Spieker**

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

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## OUR SENIOR MANAGEMENT TEAM

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### Chief Executive Officer

#### Jacqui Stewart –

Ms Jacqui Stewart is the Chief Executive Officer of COHSASA. She was appointed in April 2016. She has been involved in a wide variety of activities for COHSASA including operations, marketing, facilitation, training and client liaison. Ms Stewart joined COHSASA as the Chief Operations Manager in 2005 from the National Health Service (NHS) University in England where she was the Interim Director of the Leadership, Management and Improvement School.

Prior to that she was the Director of Career Development and Succession Planning at the NHS Modernisation Agency, Leadership Centre. She has worked across a number of areas in the English NHS, including as director primary care development in East Kent Health Authority. Ms Stewart completed her general nurse training in Cape Town and is currently completing a Master's degree in Professional Studies in Health at Middlesex University.



### HR and Quality Manager

#### Helena Tredoux

Helena Tredoux obtained her qualification in Human Resources Management in 2003 and has held several human resources generalist positions since. Her experience includes numerous years as a HR/ Business Analyst within the corporate banking industry.

Since 2009 she has been the Human Resources and Quality Assurance Manager for COHSASA ensuring that equity regulations and SA labour laws are met and that ISQua standards are implemented and maintained throughout the organisation.

She has a diploma in HR Management, and a BA and Honours degree in Psychology.



### Communications Manager

#### Marilyn Keegan

Marilyn Keegan studied for a nursing degree at the University of the Witwatersrand and was the medical reporter for the Rand Daily Mail. As an award-winning journalist, she has a wide knowledge in media and has been a senior writer for several national newspapers and magazines in South Africa. During her 17-year tenure at COHSASA she has gained experience in all aspects of corporate communications, including the management of the company website, publications, photography and digital media.

She has organised conferences and events in promoting quality and safety of healthcare in Southern Africa including the World Health Organisation conference in Durban 2005 for the African launch of the World Alliance for Patient Safety and the international conference in Cape Town to launch SafeCare in 2011. She has a degree in Communications and a post-graduate degree (BA Hons.) in English literature.



### ICT Coordinator

#### Mtisunge Chiotha

Mtisunge Chiotha joined COHSASA in 2010 and, as the ICT Coordinator, is part of a team that manages overall IT operations in the organisation.

Her passion includes improving service delivery through embracing effective and efficient use of technology; creating and leading strategic initiatives to transform the technology department to be flexible, adaptable and responsive to client needs.

Prior to joining COHSASA, Mtisunge worked for a Software Engineering company as an Applications Support Engineer providing support to clients by diagnosing and resolving software problems and providing end user training. Mtisunge holds a BSc (Hons) in Computing and Information Technology from the London Metropolitan University.



### Accounts Manager

#### Elsa Wiehman

Elsa Wiehman is the Accounts Manager at COHSASA. She has gained many years of experience in all aspects of financial management and general accounting functions and practices. Her accounting activities include the responsibility for maintaining a proper computerised accounting and staff salary system, as well as participating in company administration and financial management.

She started her career in banking and then moved into private bookkeeping and accounts work which included seven years with Theron Du Plessis Chartered Accountants. She was then appointed as an accountant at COHSASA in 1999. After six years she left to gain experience as an accountant in the construction industry. However, in 2010 she returned to COHSASA as the Accounts Manager.



### Chief Surveyor

#### Giel van Schalkwyk

Giel van Schalkwyk qualified as a medical doctor in 1983 and held several clinical and administrative positions since. He performed clinical duties as a general practitioner in various health care settings from 1983 to 1991 and thereafter gained administrative and managerial experience in different government organisations that were responsible for a broad range of health care programmes at national and regional level.

Since 1997 he has been the Chief Surveyor for COHSASA, managing the accreditation surveys of a range of health care facilities. He also trains health care surveyors and takes part in the development of accreditation standards. He has conducted more than 300 of the 600+ accreditation surveys by COHSASA to date.

# ACTIVITIES IN THE 2015/6 FINANCIAL YEAR



## Communications

Communications play an important role in COHSASA's business to ensure our stakeholders are informed and up-to-date with the work the organisation does. We publish the successes of the accreditation programme and also the names of organisations participating in the quality improvement programme as recognition of their commitment to quality.

A highlight of 2015 /2016 was the introduction of a new corporate image for COHSASA. Our branding strategy was to ensure that our logo stated clearly the nature of our business. This was supported by the introduction of new brochures, and a wide variety of promotional material, including a review of our website. The new branding was launched at the Hospital Association of South Africa (HASA) conference in Cape Town in September 2015.

The focus has been to raise the public profile of COHSASA and an indicator of success was in December 2015 when we achieved the BizCommunity Award for the most viewed Press Office in the medical portal for the year.



## Human Resources

Human resources (HR) has a pivotal role in ensuring the success of COHSASA to meet and maintain quality standards within the organisation, as staff are the most critical instruments of this venture.

COHSASA's Human Resources Department is responsible for developing and providing strategic corporate human resource programmes, services and advice in the areas of learning and development, workplace equity and diversity, performance management, leadership development, human resource policies and practices, and staffing policies.

### Investment in staff development

Based on the Workplace Skills Plan submitted to the Health and Welfare Sector Education and Training Authority (HWSETA) for the 2015 – 2016 financial period, COHSASA was awarded a Small Micro Enterprise (SME) Discretionary Grant of R74 290.40. The grant was used to train employees identified under Non-Pivotal Planned Training.

Essential update workshops took place in July and December 2015, and June 2016 for the Quality Advisers and Surveyors.



## Quality Improvement and Facilitation Unit

The Quality Improvement and Facilitation Unit is responsible for the implementation of client contracts and introducing accreditation standards in healthcare facilities. The unit carries out a range of activities as required by client contracts including:

- training of healthcare facility personnel on the accreditation standards,
- conducting baseline surveys when compliance with the accreditation standards is assessed,
- report-back visits when baseline survey results are shared and COHSASA staff guide facility personnel on how to manage identified deficiencies using quality improvement methodology,
- support visits during the contract period,
- reviews of the clients' self-assessment data that is captured into CoQIS (the COHSASA Quality Information System) at regular intervals during the contract period,
- conducting progress surveys towards the end of the contract period to determine the clients' level of compliance with the standards and readiness for accreditation,
- facility assessments on the National Core Standards (NCS) and assisting facility personnel with the design of quality improvement processes to address deficiencies.



## Survey Unit

The Survey Unit is responsible for conducting external (accreditation) surveys. Other activities include inspections of new private healthcare facilities on behalf of the Board of Healthcare Funders (BHF), and the training of surveyors.

### Surveys per client

Mediclinic	9
Botswana	5
Hospice Association	1
Anglo Coal	1
Lesotho	1
Private	1
IHK	1
Lenmed Health	1

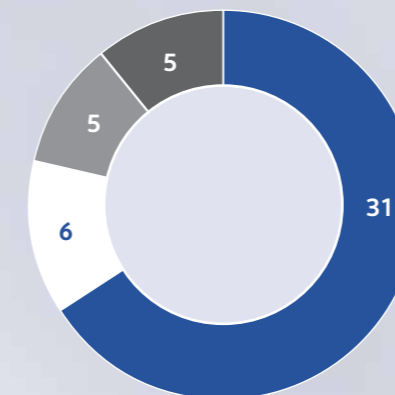
### Surveys per month

July 2015	3
August 2015	1
September 2015	1
October 2015	4
November 2015	2
January 2016	3
February 2016	4
April 2016	1
May 2016	1

Surveys, BHF, Surveyor training, consultancy

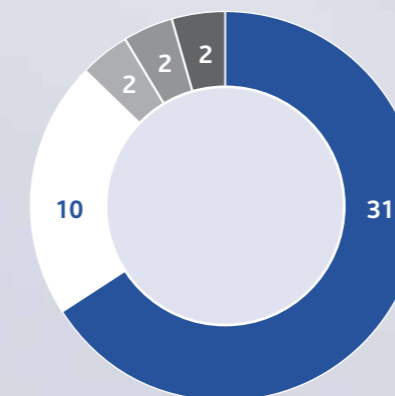
1. A total of 20 BHF inspections were conducted at a range of facilities that included private hospitals, day clinics, unattached operating theatre units, acute rehabilitation settings and sub-acute care facilities.
2. Surveyor training sessions were conducted for 13 Hospice Palliative Care Association of South Africa (HPCA) personnel, two new COHSASA appointments, and 21 SafeCare personnel.
3. Consultancy visits took place in Egypt, Saudi Arabia, Gabon, and Swaziland to perform gap analyses and provide guidance on infrastructural matters and quality improvement.

During the year a total of **47** client visits took place as indicated below:



- National Core Standards Assessments
- Baseline Survey
- Progress Survey
- Support Visit

These 47 field visits involved five client groups, across eight African countries, as indicated in the graph below:



- City of Cape Town
- Malawi (MOH/Illovo)
- Botswana (MOH/Lenmed)
- Abraaj
- MMG Kinsevere





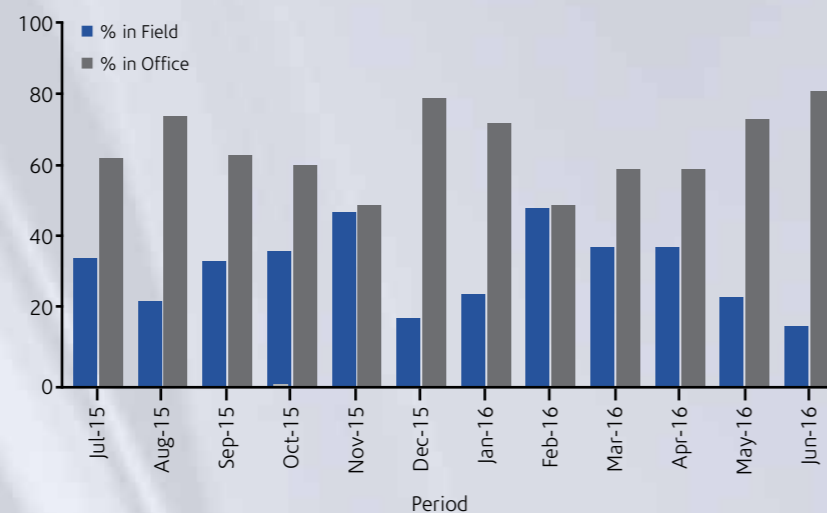
## Monitoring Quality Improvement

A balanced score card system is being maintained to monitor operational activities and key performance areas monthly. Two core performance aspects are (1) client satisfaction with the execution of survey-related activities and (2) the surveyors' adherence to, and performance against, survey-related protocols. The graph on the right depicts the unit's performance on these two aspects in relation to accreditation surveys since 2001 and indicates stabilisation of performance levels above the thresholds of 96 and 92 percent respectively.



The Quality Improvement and Facilitation Unit and Survey Unit share the same pool of staff, who function as either Quality Advisers or Surveyors. Depending on the workload, the staff complement is augmented with fulltime healthcare professionals who hold dual positions in COHSASA, or Independent Consultants who have undergone formal training to operate as COHSASA surveyors.

Staff utilisation for July 2015 - June 2016



Staff utilisation is monitored to ensure the most effective use of staff to meet clients' needs while giving staff a reasonable work-life balance.

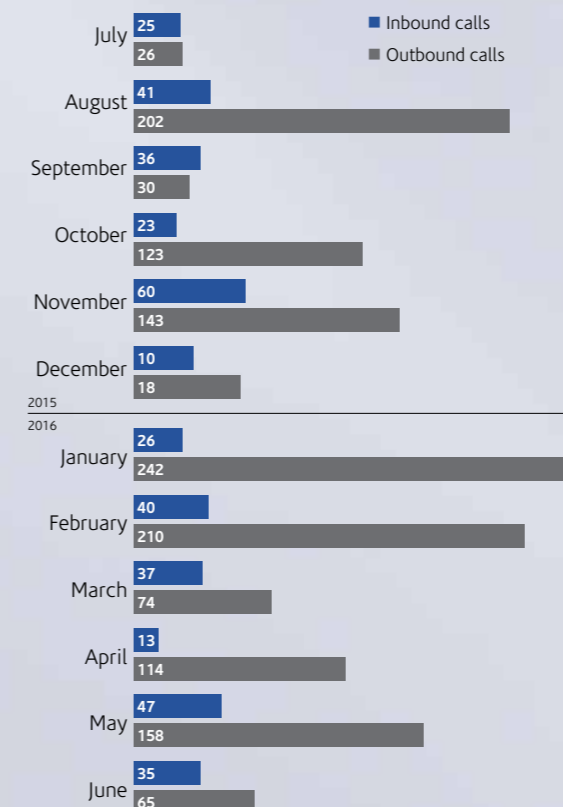


## Helpdesk and Databank

The COHSASA Helpdesk and Databank team provide essential support to two important groups. First, they assist clients to monitor their continuous quality improvement programmes. Second, they ensure that the Quality Advisers and Surveyors have all the necessary documents when they carry out support visits and external surveys. The team also trains clients to use CoQIS when they enter the quality improvement and accreditation programmes.

Many clients were highly appreciative of the assistance they received. An email from staff at Port Harcourt Hospital: "You are simply wonderful! A million thanks. Excellent customer service delivery." We like to keep our customers happy.

Helpdesk activity per month  
1 July 2015 to 30 June 2016



## Standards Development

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

- Interim Survey Standards
- Standards for Emergency Obstetric and Neonatal Care (EmONC) and the Integrated Management of Childhood Illnesses (IMCI) for the Botswana Ministry of Health
- Day-care Facility Standards
- Sedation Service Standards in collaboration with SOSPOSA\*
- Version 7 of the Hospital Standards
- Reviewing the National Environmental Health Norms and Standards introduced by the National Department of Health in December 2015 and their relationship to our accreditation standards



## PatSIS Call Centre

PatSIS is a secure web-based system with incidents reported via a call centre. This is a genuine alternative to the time-consuming paper-based processes currently being used in most healthcare facilities.

It has been developed to systemise the reporting and monitoring of incidents, whether adverse events or near misses, so as to contribute to risk awareness among healthcare staff and lead to proactive system change to decrease the probability of errors. Currently both public and private sector clients use the system. About 6000 incidents have been reported since PatSIS went live in 2013.



## ICT

The ICT team supports all the networked users as well as a number of remote users and ensures that our client-facing systems, CoQIS and PatSIS, are functioning optimally. The IT team ensures that the network and applications have minimal downtime. The CoQIS server, like the PatSIS server before it, was moved off-site during the year for additional security.

\* SOSPOSA is the Society of Sedation Practitioners of South Africa and is the umbrella organisation for all sedation practitioners in South Africa



## FINANCE

The Council is registered as a Non-Profit Company in terms of the Companies Act, No. 71 of 2008. It is also registered as a NPO with the Department of Social Development (RSA). Despite its Non-Profit and NPO status, the Council is financially self-sustainable and not dependent on grants or donor funding.

The financial audited statements for the year ended 30 June 2016 were approved by the Board of Directors on August 19, 2016. The full set of accounts are available on request from [finance@cohsasa.co.za](mailto:finance@cohsasa.co.za)

### The Council for Health Service Accreditation of Southern Africa NPC Statement of Financial Position as at 30 June 2016

Note(s)	2016 (R)	2015 (R)
<b>Assets</b>		
<b>Non-Current Assets</b>		
Property, plant and equipment	143,458	96,715
Deferred tax	310,172	305,468
	<u>453,630</u>	<u>402,183</u>
<b>Current Assets</b>		
Current tax receivable	163,527	583,803
Trade and other receivables	1,653,023	2,035,294
Cash and cash equivalents	2,165,566	1,118,763
	<u>3,982,116</u>	<u>3,737,860</u>
<b>Total Assets</b>	<b>4,435,746</b>	<b>4,140,043</b>
<b>Equity and Liabilities</b>		
<b>Equity</b>		
Members' contribution	2,300	2,300
Retained surplus	2,965,753	2,633,735
<b>Total Equity</b>	<b>2,968,053</b>	<b>2,636,035</b>
<b>Liabilities</b>		
<b>Non-Current Liabilities</b>		
Finance lease obligation	75,659	-
Deferred tax	37	-
	<u>75,696</u>	<u>-</u>
<b>Current Liabilities</b>		
Trade and other payables	953,796	1,127,701
Provisions	438,201	376,307
	<u>1,391,997</u>	<u>1,504,008</u>
<b>Total Liabilities</b>	<b>1,467,693</b>	<b>1,504,008</b>
<b>Total Equity and Liabilities</b>	<b>4,435,746</b>	<b>4,140,043</b>

## INDEPENDENT AUDITORS' REPORT

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

We have audited the annual financial statements of The Council for Health Service Accreditation of Southern Africa NPC, as set out on pages 7 to 18, which comprise the statement of financial position as at 30 June 2016, and the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and the notes, comprising a summary of significant accounting policies and other explanatory information.

#### Directors' Responsibility for the Annual Financial Statements

The company's directors are responsible for the preparation and fair presentation of these annual financial statements in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities, and 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 misstatements, whether due to fraud or error.

#### Auditors' Responsibility

Our responsibility is to express an opinion on these annual financial statements based on our audit. We conducted our audit in accordance with International Standards on Auditing. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance whether the annual financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the annual financial statements. The procedures selected depend on the auditors' judgement, including the assessment of the risks of material misstatement of the annual financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the annual financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the annual financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### Opinion

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 2016, and its financial performance and its 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.

#### Emphasis of Matter

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

**Theron du Plessis Durbanville Inc.**  
Partner  
Registered Auditors  
Per: B Swenson CA (SA) RA

12 August 2016

## CONTACT DETAILS

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You can access this report and download it from our website.  
Please direct queries regarding this annual report to [marilyn@cohsasa.co.za](mailto:marilyn@cohsasa.co.za)

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