

## COMMUNIQUE - DECEMBER 2019

In 2000 when HQA was formed as a non-profit company, its stated purpose was as follows: “To develop a health audit report of the health care funding industry focusing on quality with the goal of becoming the Southern African national standard of objective performance measurement for quality that will in an evolutionary way develop with the industry.” The philosophy, on which HQA was founded, is: “What you don’t measure you cannot manage.” But what is meant by health quality? The best definition of clinical quality can be summarized as: “The right diagnosis, followed by the right treatment, at the right time, in the right setting, at the right price, delivering the right outcome.” Early detection and prevention are equally important components of good health quality.

At the end of 2019 HQA completed its 15th year of data collection, analyses and reporting. This year some 169 health quality indicators were used, spread across four categories: prevention and screening, chronic disease management, hospitalization and maternity and newborn. The data used for the 2019 reports covers nearly 80% of all medical scheme insured lives. None of this could have been achieved without the voluntary participation and support of HQA’s member organizations, namely medical schemes, administrators, managed care organizations, doctor networks, pharma and hospitals. All along HQA has been striving to develop effective strategic relationships with important stakeholders such as CMS, OHSC, DOH, professional associations, academic institutions and consumer bodies. The healthy collaboration that exists amongst HQA’s member organizations results from: sharing a common vision of health quality measurement and reporting, co-developing the quality metrics, voluntary participation, data security and confidentiality.

Whereas HQA currently mainly uses process indicators measured from claims data and only reports to medical schemes, it is challenged in the HMI Report and by others to develop outcomes measures using clinical and patient data and to share results with healthcare providers, facilities and consumers. These challenges fit into HQA’s long term strategy and will be rolled out in phases whilst continuing to strengthen HQA’s profile as an independent outcomes measurement and reporting entity for the South African health care industry and maintaining the principles of voluntary participation, data security and confidentiality.

HQA would like to thank its member organizations and stakeholders, members of the CAB, members of the HQA Board and consultants for their support and productive collaboration during the 2019 year and wishes everyone a safe and a pleasant festive season.

Louis Botha

Reg No 2000/025855/08

Directors: Dr FPJ Griesel (Chairman), BA Dickson (Vice-Chairman), M van der Merwe, Dr RM Naidoo, Dr U Mahlati, Dr JHB Steenekamp, M Marais, S Collie\* (\*Alternate Director)