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#### **COMMUNIQUE FOURTH QUARTER 2024**

# **Two Decades of Healthcare Quality Reporting**

In 2024, HQA proudly marked its 20<sup>th</sup> consecutive year of reporting on healthcare quality in South Africa. The 2024 analysis encompassed data from 7.43million beneficiaries, representing 82% of all medical scheme-insured lives in the country. The report highlighted 220 healthcare quality indicators categorised as follows:

- -Statistical metrics: 47 indicators -Process measures: 88 indicators -Utilisation indicators: 44 indicators
- -Admission/Proxy outcomes indicators: 41 indicators

## Why Healthcare Quality Measurement and Reporting Matters:

Measuring and reporting healthcare quality is essential as it:

- -Enhances patient experience
- -Improves health outcomes
- -Strengthens patient-practitioner relationships
- -Identifies areas for improvement
- -Strengthens the overall healthcare system
- -Reduces long-term costs
- -Establishes benchmarks and standards
- -Mitigates disparities in care, reducing outliers
- -Improves predictability of outcomes

Healthcare quality can be measured at different levels: structure, processes, and outcomes. Healthcare funders, practitioners and facilities get value from process measures as they are easier to measure and provide more immediate results. Outcomes measures require clinical data and take much longer before results can be determined. Governments regard outcome measures as important indicators of the strength of a healthcare system.

### **HQA's Healthcare Quality Focus Areas**

HQA's indicators are grouped into four key categories:

- -Prevention and screening
- -Antenatal care
- -Chronic disease management
- -Hospitalisation

Progress has been made in integrating wellness and capitation data alongside claims data. Work is ongoing to incorporate further in-house codes, fixed fee/per-diem arrangements, and clinical data into the dataset.

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#### Stakeholder Contribution and Collaboration

In 2024 HQA was supported by 40 healthcare organisations, including 18 medical schemes and 22 other entities such as administrators, managed care organisations, disease management organisations, industry bodies, doctor networks, hospital groups, laboratories, and pharmaceutical companies.

I would like to thank everyone for their contribution, however big or small. HQA cannot exist without: funders willing to participate, and the membership and support from all the other healthcare organisations and stakeholders. A special thank you to Prof Jacqui Miot and her team, Dr Martie Conradie and Obaidiyah Mustapha for keeping it all together. Thank you to Adam Lowe and his team at NMG for all the technical support, and to Dr Johann van Zyl for preparing and presenting the HQA Industry and Scheme Reports. Thank you to Chairco and members of the HQA Board of Directors for overseeing good corporate governance and providing strategic leadership. And thank you to important stakeholders CMS and OHSC for collaborating on measuring and reporting healthcare quality.

## Looking ahead to 2025

HQA's key priorities for 2025 include:

- -Expanding the dataset with clinical data and patient reported outcomes
- -Collecting data for the Localised Prostate Cancer Registry
- -Developing strategies to enhance healthcare quality report adoption by doctors
- -Initiating a healthcare quality report for doctors
- -Strengthening collaborations with strategic stakeholders

As the 2024 year concludes, we thank you for your efforts to promote healthcare quality. Wishing you a restful summer break, and looking forward to achieving new milestones together in 2025.

Louis Botha CEO HQA

"If you want to achieve something important, dream big, start small, but begin immediately." Anonymous