

Theme 3

Quality care

Delivering consistently excellent clinical care.

Our focused clinical improvement initiatives aim to provide consistently excellent clinical care. To achieve doctor support, we benchmark our pathways against international guidelines and collaborate with local academic and professional associations to gain their endorsement. Clinical improvement parameters are monitored against set goals.

Learning from international successes, we have introduced some groundbreaking initiatives for Africa.

Breastmilk donation

Netcare outcomes

Pre-term infants fed with donor breastmilk, rather than an artificial formula when a mother's own breastmilk is insufficient or unavailable, have a reduced risk of severe bowel problems¹⁵, which in turn reduces mortality and morbidity for these infants. Netcare operates five Ncelisa Human Milk Banks (Ncelisa meaning to nurse a child in isiZulu) supported by 37 collection points for donor breastmilk, which is provided free of charge to the public and private sector.

Our objectives are to increase the number of babies being fed with age appropriate donor breastmilk, and increase the percentage of breastmilk donated to the public sector to 33% of donated milk.

Measure definition: the number of mothers donating and the number of babies fed.

Universal newborn hearing screening

It is estimated that 17 babies in SA are born with hearing loss every day, with late identification of this disability severely impacting development. Universal newborn hearing screening (UNHS) is an international best practice, using the 1:3:6 formula – screening by one month, diagnosis by three months and early intervention started by six months of age. In June 2019, we introduced UNHS in our hospitals.

Netcare outcomes (at September 2019)

82% of newborns screened - a 24% increase when compared to June 2019. 1105 newborns referred for further testing – a referral rate of 14.7%, which is in line with the 10-15% referral rate expected when UNHS is implemented in developed countries.

15. Website: https://path.azureedge.net/media/documents/MCHN_1_milk_banking_overview.pdf.

Dialysis outcome measures

Effective dialysis reduces the risk of long-term dialysis patients developing bone and mineral disorders, anaemia and inadequate nutrition. Pathology markers aligned to the Dialysis Outcomes and Practice Patterns Study (DOPPS) – a leading source of international benchmarking data for dialysis treatment – are used to measure National Renal Care's dialysis outcomes.

National Renal Care outcomes

National Renal Care compares favourably to the DOPPS benchmark for albumin and phosphates, and shows a marginal decline in the management of bone and mineral disease and anaemia. The declines are due to an inconsistent supply of erythropoietin, used in the management of anaemia, and the persistent lack of availability and affordability of phosphate binders, which results in patients having to use a calcium carbonate phosphate binder.

National Renal Care continues to be a clinical leader in dialysis treatment in SA, achieving a 79.1% score from the Discovery Health Kidney Care programme – 0.1% above industry average and a 0.8% improvement compared to 2018. Thirty-five National Renal Care units achieved a score greater than industry average.

Dialysis outcome measures (higher score is better)	DOPPS	2019	2018	2017
Calcium (bone and mineral disorders)	61.0%	67.6%	68.5%	67.1%
Phosphates (bone and mineral disorders)	46.0%	47.7%	48.8%	48.0%
Haemoglobin (anaemia)	62.0%	52.6%	53.0%	52.8%
Albumin (nutritional insufficiency)	84.8%	85.3%	85.6%	83.2%

Measure definition: the percentage of patients with pathology results that are in the recommended range as defined by the 2017 DOPPS benchmark.