## Value of care

### Perception of care

To drive a person-centred mindset and culture of continual improvement, we are delivering interventions that meaningfully support and empower our employees in their interactions with our patients, and introducing information management systems, analytics and reporting that provide useful and understandable information that is accessible to employees and patients.

#### Mechanisms that support better patient engagement

By engaging with Netcare's patients and their loved ones in a meaningful, caring and understandable way, we enable them to partner with us on their journey to health. We remain dedicated to ongoing improvement in this care dimension. Direct patient contact and support is achieved using a number of channels:

- Person-centred care teams in each hospital.
- An online and a post discharge email survey.
- · A bespoke complaint management system, CareNet, including an online form with context-specific categories. The form accounted for over 1 800 connections with hospital patients during 2020. The per-hospital complaint rate dashboard is refreshed every 30 minutes.
- · A customer care team that operates a central contact centre, direct contact with the hospital, regional or corporate offices, corporate website and social media platforms. All of these avenues interface with CareNet.
- Strategic initiative Various digital initiatives that enhance patient experience and perception of care, for example, Netcare appointmed<sup>™</sup> and pre-admission initiatives (see page 166).
- · Patient experience outcomes dashboards per hospital published on the Netcare website, covering a rolling 12-month period.
- · Patient focus groups and listening forums.

# Stakeholder engagement in action

COVID-19 limited visits to hospitals and nursing units. To accommodate this, our person-centred care team conducted telephonic virtual rounds with patients and facilitated contact and communication between patients and their loved ones. Person-centred solutions were designed and implemented to ensure that patients felt cared for.

Families of critical and end-of-life patients were granted access to see their loved ones, and guidelines were developed to help our employees compassionately communicate a patient's death or deterioration over the telephone.

We also developed the Netcare patient communicator – an SMS platform. This service alerts patients discharged from a Netcare facility if they have potentially come into contact with a COVID-19 patient, providing them with contact information for support services should they develop symptoms.

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# 2020 performance

- · Rolled out the first phase of the person-centred quality improvement programme in the Hospital division to enable proactive and purposeful engagement with patients at key points of contact - hospital reception, nursing, pharmacy and customer care teams. Over 14 weeks (ended November 2020), 115 employees in nine hospitals participated in the programme. At the end of the first phase, we achieved statistically sound improvements in nursing and discharge information scores, and a lower number of complaints. An increased number of compliments were received across the key points of contact. Participants reported improved teamwork and a reignited passion for their work and care for their colleagues and patients.
- · Launched a number of employee support mechanisms, including weekly technical support sessions in each hospital to share challenges and brainstorm issues such as building a connection with patients and their loved ones, and ways of ensuring social distancing in public areas. Employees also have access to near real-time data of patient experience and how this compares to targets.
- Strategic initiative Implemented a series of behavioural interventions and training workshops on person-centred engagement (compassionomics). Target behaviours were

- tracked and compared against behaviours prior to the compassionomics initiatives. Feedback was also elicited from patients and employees. Both data and feedback showed positive results. These interventions support our new nurse recognition programme (see page 147).
- · Introduced a continuous professional development pilot for oncology nurses. The eight-week virtual learning programme has proved valuable in gaining a deeper insight into leading the way in oncology nursing in SA. Nineteen nurses were registered for the programme with 85% completing the course by the end of July 2020.
- Oncology nurse navigators continued to support patients, their doctors and treating teams using virtual platforms. The navigators provided patients with COVID-19 information and provided support to families who had lost a loved one.
- · Partnered with the Cancer Association of South Africa (CANSA) to establish cancer support groups at nine of our hospitals. The groups empower patients to participate in their cancer treatment journey and provide support to cancer survivors, those who have been in remission for years and family members and caregivers of individuals with cancer.

#### **Looking forward**

- Strategic initiative Roll out a revised patient survey feedback form.
- Strategic initiative Continue to enhance patient experience and perception of care using digital solutions (for example, improve the search functionality on the Netcare website, improve the user experience of the doctor booking functionality, improve the Netcare appointmed™ website design and redesign the patient portal and user experience, among others).
- Strategic initiative Leverage the virtual navigation services, introduced to engage with cancer patients during COVID-19, to extend the reach of this care coordinating service.

### **Clinical performance**

The measurement of our clinical performance is central to delivering consistently excellent quality of care outcomes and demonstrates our value to patients and funders. Our clinical outcomes data is reported in the three categories outlined below, aligned with our purpose.

Providing you	with the best	and safest care.
➤ Person-centred care that is aligned with a patient's need and preferences.	➤ Best practice in providing care to patients that is proven to work.	➤ Safest care that protects patients from error and harm.
► Measured using patient reported outcome measures (PROMs) and patient reported experience measures (PREMs).	➤ Measuring the <b>best time</b> when it really matters, the <b>best ways</b> that have been proven to work, resulting in the <b>best possible results</b> .	► Measured by reporting on incidents that result in harm to a patient, no matter how minor.

Our outcomes are updated annually and are based on a rigorous process aligned with international standards, in accordance with good data science practice. Our internal processes for reporting clinical outcomes data are well-managed and robust. These are overseen by Consistency of Care Committees at Board and service platform levels. The new Clinical Data Council is responsible for coordinating the collection of clinical data across all service platforms, ensuring that data collection, reports and analysis align, and ensuring the accuracy and completeness of all datasets.

Changes in our clinical outcomes reporting for 2020 include:

- · An improved measure for depression severity improvement (Akeso Clinics), which replaces a 2019 measure.
- 35 new measures added, which are clearly marked.

Updates for the following measures are not reported and have been deferred to 2021 as development was interrupted by COVID-19: the probability of survival for Priority 1 trauma patients, anticipated Priority 3 patient waiting time in the Emergency department and the actual to predicted antibiotic consumption measures.

Results in this report may differ from those published in the 2019 clinical outcomes publications in cases where additional data became available after publication or where there have been minor changes in methodology. These changes have been applied retrospectively to past outcomes and are clearly noted. In most cases, the changes are due to previously outsourced actuarial services having been brought in-house.



The clinical outcomes disclosure that follows provides a summarised overview of our performance in 2020. More detailed disclosure, including full indicator descriptions as well as the medical standards used and the systems we employ to capture this data, can be found online.

### Person-centred care **PROMs**

Indicator	Measure definition	2020	2019	2018
National Renal Care				
A higher score is better.				
Physical wellbeing for patients on long-term haemodialysis	% of patients who report that their physical wellbeing is within the recommended range	70.7%	66.7%	67.9%
Mental wellbeing for patients on long-term haemodialysis	% of patients who report that their mental wellbeing is within the recommended range	89.8%	87.2%	88.2%
Akeso Clinics				
A higher score is better.				
Improvement in symptom severity	Measured using the Aw effect size (the size of the difference in scores between admission and discharge)	0.848	0.8671	0.8751
Improvement in level of functioning		0.714	0.7331	0.7231
NEW Improvement in depression severity	for adult patients. Results over 0.71 indicate a large improvement	0.875	0.875	0.866
Netcare Cancer Care <sup>2</sup>				
A higher score is better.				
<b>NEW</b> Best possible feeling of wellbeing		67.8%	-	_
NEW Severe discomfort or unhappiness	% of patients reporting the best	2.6%	-	_
NEW No pain	possible feeling of wellbeing, severe	85.2%	-	-
NEW Severe pain	lack of wellbeing etc.	2.3%	-	-
NEW No distress		79.7%	-	-
NEW Severe distress		1.8%	_	-

# 2020 performance

Dialysis patients are a particularly high-risk, vulnerable group. As such we continuously encourage them to maintain their dialysis prescriptions during COVID-19. Patients are also given access to ICAS – a multi-disciplinary, multi-lingual team of clinical psychologists, registered counsellors and social workers – to provide support and alleviate any anxiety and fear they may have about COVID-19.

Akeso Clinics introduced a research and development function to focus on clinical outcomes. During the year, the team reviewed the treatment programmes that showed higher numbers of relapses and non-compliance for the 'emerging adult' group of patients and substance misusers. In 2021, the focus will be to revise these programmes to be more relevant and impactful.

Our oncology nurse navigators are members of the multi-disciplinary healthcare teams who support and guide cancer patients. They use the PROMs to assist the healthcare team to understand how a patient is coping with treatment and whether changes need to be made. 492 patients were supported by our navigation programme in the second half of the 2020 calendar year.

Restated (analytics insourced).
 Data gathered for April 2020 to September 2020.

#### **PREMs**

Indicator	Measure definition	2020	2019	2018
Hospital division				
A higher score is better.				
Nurses always explain in a way you understand		67.4%	67.3%¹	60.5%1
Nurses always listen carefully		68.4%	68.5%¹	61.5%
Nurses always treat you with courtesy and respect	% of patients who rated their experience as always <sup>2</sup> in response to each question divided by the number	77.2%	77.3%1	71.2%
Doctors always explain in a way you understand	of patients that responded to the question	84.6%	84.2%1	79.6%
Doctors always listen carefully	question	86.7%	86.3%	81.7%
Doctors always treat you with courtesy and respect		90.6%	90.3%	86.2%
Akeso Clinics				
A higher score is better.				
Nurses always explain in a way you understand		81.0%	83.5%	83.3%¹
Nurses always listen carefully		78.8%	81.5%	81.6%¹
Nurses always treat you with courtesy and respect	% of patients who rated their experience as always <sup>2</sup> in response to each question divided by the number	81.1%	84.4%	84.6%1
Doctors always explain in a way you understand	of patients that responded to the question	92.1%	92.6%	92.3%¹
Doctors always listen carefully	'	92.7%	93.2%	93.0%1
Doctors always treat you with courtesy and respect		94.2%	94.3%	94.2%1
National Renal Care <sup>3</sup>				
A higher score is better.				
NEW Dialysis centre staff always explain in a way you understand	% of patients who rated their	65.5%	-	_
<b>NEW</b> Dialysis centre staff always listen carefully	experience as always <sup>2</sup> in response to each question divided by the number of patients that responded to the	68.9%	-	-
<b>NEW</b> Dialysis centre staff always show respect for what you say	question	70.9%	-	_

Restated (for the Hospital division the restatements are mostly due to additional information received after publication and for Akeso Clinics analytics have been insourced).

# 2020 performance

While most scores remained stable for 2020, the nursing scores for Akeso Clinics decreased by an average of 2.8%. This was not entirely due to COVID-19, although patients may have perceived aloofness or less courtesy on the part of nurses as a result of social distancing. Looking forward, we will intensify our focus on enhancing patient experience while maintaining the COVID-19 precautions that we have worked so hard to put in place to ensure the safety of our patients, employees and doctors.

During the year, National Renal Care transitioned their bi-annual patient experience surveys from paper to an electronic version. Unfortunately, survey results have declined. The August survey was conducted during the initial COVID-19 surge, potentially contributing to this decline.

The response options are always, usually, sometimes and never.
 Reported for August 2020 (questions ask about a patient's experience in the last three months).

## Best results for patients requiring physical rehabilitation

Indicator	Measure definition	2020	2019	2018
Improvement in functional independence				
A higher score is better.				
<b>NEW</b> Stroke		5.90	3.98	4.24
<b>NEW</b> Acquired brain injury	Average improvement in Functional	5.44	5.00	5.09
<b>NEW</b> Spinal cord injury	Independence Measure (FIM) score	5.17	4.40	3.66
NEW Amputees	per week	3.40	2.30	3.01
NEW Polytrauma		6.86	6.20	4.60
Patients discharged home				
A higher score is better.				
<b>NEW</b> Strokes		88.6%	89.3%	89.0%
<b>NEW</b> Acquired brain injury	% discharged to their home	91.1%	84.0%	89.4%
<b>NEW</b> Spinal cord injury	environment	98.8%	92.4%	92.9%
<b>NEW</b> Amputees		97.0%	92.8%	93.3%

# 2020 performance

In 2019, there was an increase in severe stroke patients and an increase in their average age, resulting in a slight decrease of average FIM gain per week to 3.98. Enhancements in therapy programmes have resulted in an improvement for 2020. Overall, a large percentage of rehabilitation patients continued to be successfully reintegrated into their home environment.

## Best time for patients needing an ambulance

Indicator	Measure definition	2020	2019	2018
Response time				
A lower score is better.				
How quickly Netcare 911 responds	Median time in minutes	16.40	15.85¹	15.98
Pain management				
A higher score is better.				
NEW Managing pain pre-hospital	% of patients with pain scores of six or higher out of 10 whose pain is reduced to less than six	64.4%	61.1%	_
Best place for a patient's condition				
A higher score is better.				
<b>NEW</b> Best place for Priority 1 trauma patients (requiring immediate resuscitation and stabilisation)	% of Priority 1 trauma patients transported to Level 1 and 2 accredited trauma centres	60.5%	_	_
<b>NEW</b> Best place for patients with cardiac chest pain	% of patients with cardiac chest pain transported to hospitals with a cardiac catheter laboratory	81.3%	-	_
<b>NEW</b> Best place for patients with stroke symptoms	% of patients with stroke symptoms transported to hospitals with specialised stroke services	60.6%	-	-

<sup>1.</sup> Restated to align to data from Netcare 911.

## 2020 performance

Several factors increased Netcare 911's response time during COVID-19, including more time needed to capture a patient's history during the call to understand their COVID-19 exposure risk as well as to don personal protective equipment (PPE) and safely enter scenes. This trend is mirrored worldwide1. COVID-19 also had a significant impact on hospital destinations due to constrained intensive care unit (ICU) bed availability.

The improvement achieved in managing pain before admission to hospital is due to focused education initiatives and real-time assistance provided to Netcare 911 crews.

### Best time for patients with severe infections

Indicator	Measure definition	2020	2019	2018
A higher score is better.				
How quickly antibiotics are administered for severe infections	% of patients who receive their first dose of antibiotics within one hour of prescription	88.0%	86.0%	84.8%

## 2020 performance

Improving this indicator remains a priority for our hospital antibiotic stewardship programmes. Compliance in 2020 has been the best recorded in seven years and may be due to improvements in the logistics around medication delivery during COVID-19.

### Best results for newborn babies

Indicator	Measure definition	2020	2019	2018
A lower score is better.				
<b>NEW</b> Necrotising enterocolitis <sup>2</sup> (NEC rates	% of newborns admitted to a neonatal ICU who develop NEC	2.7%	-	_
<b>NEW</b> NEC rates for babies with a birth weight of 501 grams to 1 500 grams	% of newborns with a birth weight within this range admitted to a neonatal ICU who develop NEC	12.1%	_	
	HEOHALAI ICO WHO GEVEIOP IVEC	12.170		

<sup>2.</sup> NEC is a serious disease that can develop in babies when the inner lining of their gut becomes damaged. NEC is more common in very sick or preterm babies. Babies who are only fed breastmilk are less likely to develop this disease.

# 2020 performance

Of our 36 participating hospitals, 33 finalised their neonatal data in time to be included in the Vermont Oxford Network (VON) 2019 Annual Report, a significant improvement from two in 2018. VON is an international not-for-profit company that collates newborn outcomes worldwide.

<sup>1. &</sup>quot;The Pandemic Arrives: EMS Faces COVID-19 | EMS World," https://www.emsworld.com/article/1224204/pandemic-arrives-ems-faces-covid-19.

#### Best way for newborn babies

Indicator	Measure definition	2020	2019	2018
Human breastmilk				
A higher score is better.				
<b>NEW</b> Babies discharged on breastmilk only	% of neonatal ICU babies	45.2%	-	-
Number of babies fed with donor breastmilk	Number of babies	688	593	393
Number of mothers donating their excess breastmilk	Number of donors	191	209	171
Neonatal hypothermia				
A higher score is better.				
<b>NEW</b> Temperature on admission to a neonatal ICU	% of babies admitted to neonatal ICU who were normothermic (36.5°C to 37.5°C) within the first hour of their admission	58.1%	_	_
Hearing screening				
A higher score is better.				
Newborns screened in our hospitals	% of total live births	66.9%	75.3%	-
Newborns referred for further testing (%)	% of newborns screened who were referred for further testing	13.8%	14.7%	-
Newborns referred for further testing (number)	Number of newborns referred for further testing	2 900	1 105	_

# 2020 performance

Netcare continued to operate five Ncelisa Human Milk Banks and 37 collection points for mothers to donate excess breastmilk. This is provided free of charge to the public and private sectors. The number of newborn babies fed with donated breastmilk continues to increase.

Prior to the national lockdown, the percentage of live births screened using the Universal Newborn Hearing Screening formula (screening by one month, diagnosis by three months and early intervention started by six months of age) was 79%. During the initial surge, screening personnel did not have access to our hospitals, resulting in a reduction in newborns screened. At the time of reporting, screening had resumed. The reduction in newborns referred for testing is due to screening personnel becoming more proficient in performing the screening tests.

#### Best way for patients on long-term haemodialysis

Indicator	Measure definition	2020	2019	2018
A higher score is better.				
Calcium – bone and mineral disorder for patients on long-term haemodialysis	% of patients whose latest calcium results are within the recommended range	68.5%	67.6%	68.5%
Phosphates – bone and mineral disorder for patients on long-term haemodialysis	% of patients whose latest phosphate results are within the recommended range	48.1%	47.7%	48.8%
Haemoglobin – anaemia for patients on long-term haemodialysis	% of patients whose latest haemoglobin results are within the recommended range	53.8%	52.6%	53.0%
Albumin – nutritional insufficiency for patients on long-term haemodialysis	% of patients whose latest albumin results are within the recommended range	85.8%	85.3%	85.6%

## 2020 performance

COVID-19 has affected dialysis patients and dialysis care worldwide. National Renal Care has worked relentlessly to ensure a safe environment and continued holistic treatment for our dialysis patients. Working with our doctors and patients, we have continued to drive improvement in renal dialysis clinical outcomes.

#### Safest care

Under-reporting of incidents may have occurred during the first surge given the additional focus required to treat COVID-19 patients. In addition, the number of admissions reduced and the hospital patient profile changed given the reduction in elective surgeries and patient reluctance to seek hospital care. We will continue to monitor these measures to gain a better understanding of the COVID-19 impact on delivering the safest care.

#### Infection prevention

Indicator	Measure definition	2020	2019	2018
A lower score is better.				
Any infection acquired in hospital	Hospital infections acquired 48 hours after admission per 100 admissions	1.01	0.96	0.97
Infected operation wounds	Surgical site infections per 100 major surgeries (including caesarean- sections)	0.08	0.11	0.14
Urinary tract infections	Catheter associated urinary tract infections per 100 catheters inserted	1.09	1.16	1.12
NEW Blood stream infections	Catheter associated blood stream infections per 100 central lines	4.64		
	inserted	1.64	_	-

# 2020 performance

COVID-19 highlighted the importance of these measures and we acted swiftly to implement additional IPCs to combat the spread of the virus. Additional ultraviolet C robots were procured, reducing disinfection time from two hours to 10 minutes and freeing up bed capacity for new patients. The rate of hospital acquired infections increased during the first COVID-19 surge, likely due to the changing patient profile. All hospitals are closely monitoring acquired infections as we re-open for elective surgery.

#### Antibiotic stewardship

Indicator	Measure definition	2020	2019	2018
Use of antibiotics				
Use of antibiotics in hospitals	Defined daily dose per 100 bed days	96.4	86.8	84.7
Antibiotic prescription review				
A higher score is better.				
NEW Right antibiotic	% of patients receiving the right antibiotic for their infection	99.1%	98.0%	98.9%
NEW Right antibiotic dose	% of patients receiving the right antibiotic dose for their infection	99.1%	99.3%	99.3%
NEW Right antibiotic duration	% of patients receiving the right antibiotic duration for their infection	98.1%	97.8%	98.3%

# 2020 performance

Overall antimicrobial consumption for the Hospital division increased during COVID-19. This was a result of decreased patient days and increases in severe cases of hospital admissions and the overall utilisation of antibiotics for patients admitted. Going forward, the hospital antibiotic stewardship programmes will be strengthened using predictive analytics.

Compliance across the antibiotic prescription review criteria improved in 2020, implying a decreased need for interventions in these important antibiotic stewardship measures. This may be a result of improved relationships between prescribers and pharmacists and the inclusion of clinical pharmacists as part of multi-disciplinary teams that decide on a patient's care.

### **Medication safety**

Indicator	Measure definition	2020	2019	2018
A lower score is better.				
Hospital division				
<b>NEW</b> Medication-related events that result in patient harm, no matter how minor	Medication incident involving harm to a	0.04	0.02	-
Akeso Clinics	patient per 100 admissions			
<b>NEW</b> Medication-related events that result in patient harm, no matter how minor		0.07	0.27	-
Medicross				
<b>NEW</b> Medication-related events that result in patient harm, no matter how	Medication incident involving harm to a patient per 10 000 visits			
minor		0.04	0.04	0.08

## 2020 performance

Given the increase in medication incidents in the Hospital division, we will focus on improving our identification of the criteria that can lead to these to reduce the risk of similar incidents.

The significant improvement in medication safety at Akeso Clinics was largely due to the implementation of Netcare's mature medication safety programme, providing Akeso Clinics with a consistent high-quality pharmacy service and medicine supply, supplemented by a mature and robust safety and incident management system. Lower patient volumes also enabled more focused attention to patient care.

Medicross' improvement between 2018 and 2019 was due to a quality improvement methodology, which provides a platform for learning and problem-solving. It also introduces a new approach where two healthcare professionals check that the correct medication is drawn up and safely administered for each patient in the treatment room.

#### Fall prevention

Indicator	Measure definition	2020	2019	2018
A lower score is better.				
Hospital division				
Falls that result in injury, no matter how minor	Falls that result in injury per 100 admissions (patients older than 18)	0.11	0.10¹	0.10 <sup>1</sup>
Akeso Clinics				
<b>NEW</b> Falls that result in injury, no matter how minor		0.66	0.72	-

<sup>1.</sup> Restated (aligned with other measures to report per 100 admissions and analytics brought in-house).

# 2020 performance

In 2019, special attention was paid to reporting fall incidents in the Hospital division. However, gains made were lost due to COVID-19. While nurses became accustomed to having to don PPE before entering a patient's ward, the answering of the call bell was at times delayed. During the initial surge, most falls were the result of patients getting out of bed before they could be assisted. We will refocus our efforts on this indicator going forward.

There is no appropriate benchmark for falls in mental healthcare facilities. As we establish a trend for Akeso Clinics, we will have a clearer idea of the right policy to adopt.

#### Pressure lesion prevention

Indicator	Measure definition	2020	2019	2018
A lower score is better.				
Developing a severe pressure lesion	Stage III and IV hospital acquired pressure lesions (reaching muscle and bone) per 100 admissions of three days or longer days (patients 18 years and older, obstetrics excluded)	0.02	0.021	0.011

<sup>1.</sup> Restated (aligned with other measures to report per 100 admissions and analytics brought in-house).

### **Looking forward**

• Strategic initiative Move to more frequent updates of clinical outcomes on our website as this strategic imperative matures.

# Safety and health, environmental sustainability and quality

We are integrating our OHS, environmental sustainability and quality management systems (QMS), which previously functioned separately. Key deliverables for 2020 were to create standardised SHEQ practices and procedures across our service platforms and to digitise these practices to enable datadriven SHEQ decision-making. Central to this, is the implementation of a digital system (SafeCyte) to manage and document the SHEQ strategy.

SafeCyte will record all OHS interventions Group-wide, digitise our SHEQ risk assessment methodology (including those prescribed in the Occupational Health and Safety Act and its related regulations), record all OHS training and support central quality and compliance assurance processes.

COVID-19 highlighted the importance of a robust SHEQ system and the need for readily available accurate data. As a result, we accelerated the implementation of our new OHS strategy, adapting it where necessary to address the immediate and unique concerns brought about by the pandemic. We have ensured that these solutions support our long-term objective to create a world-class SHEQ system for the Group.

We are standardising roles and responsibilities across all service platforms to ensure efficient resource use, appropriate staffing and a robust SHEQ organisational design.