

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter
EASTERN CAPE
Sector: Health

Programme / Subprogramme / Performance Measures

**Target for
2015/16 as per
Annual
Performance
Plan (APP)**

**1st Quarter
Planned output
as per APP**

**1st Quarter
Preliminary
output**

QUARTERLY OUTPUTS

Programme 1: Administration

Percentage of Hospitals with broadband access 50.0% 10.0% 0%
 Percentage of fixed PHC facilities with broadband access 49.0% 10.0% 0%

Programme 2: District Health Services

District Management

Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard 10.4% 2.0% 0%
 Patient Experience of Care rate (PHC Facilities) 73.0% 73.0% 0%
 Number of Districts with District Clinical Specialist Teams (DCSTs) 8 2 5
 PHC utilisation rate 2.8 0.0 2.7
 Complaints resolution rate 92.0% 92.0% 75.5%
 Complaint resolution within 25 working days rate 80.0% 80.0% 97.5%

HIV and AIDS, TB and STI control

Total clients remaining on ART 355,531 320,746 322,897
 Client tested for HIV (incl ANC) 1,300,648 325,162 344,223
 TB symptom 5yrs and older screened rate 70.0% 70.0% 0.7%
 Male condom distribution Rate (annualised) 38 38 45
 Female condom distribution Rate (annualised) 1 1 1
 Medical male circumcision performed - Total 49 000 133 3 249
 TB new client treatment success rate 82.0% 82.0% 81.0%
 TB client lost to follow up rate 6.8% 6.8% 7.0%

Maternal, child and women health

Antenatal 1st visit before 20 weeks rate 50.0% 50.0% 54.2%
 Mother postnatal visit within 6 days rate 55.0% 55.0% 56.5%
 Infant 1st PCR test positive around 6 weeks rate 1.5% 1.5% 1.9%
 Immunisation coverage under 1 year (annualised) 90.0% 90.0% 80.0%
 Measles 2nd dose coverage (annualised) 90.0% 90.0% 73.3%
 DTap-IPV/Hib 3 - Measles 1st dose drop-out rate 0.5% 0.5% 6.5%
 Child under 5 years diarrhoea case fatality rate 5.6% 5.6% 5.4%
 Child under 5 years pneumonia case fatality rate 4.0% 4.0% 2.1%
 Child under 5 years severe acute malnutrition case fatality rate 10.0% 10.0% 14.7%
 School Grade R screening coverage (annualised) 10.0% 2.0% 0%
 School Grade 1 screening coverage (annualised) 27.4% 16.0% 42.7%
 School Grade 8 screening coverage (annualised) 10.0% 2.0% 24.5%
 Couple year protection rate (annualised) 63.0% - 0%
 Cervical cancer screening coverage (annualised) 44.0% 44.0% 50.6%
 Vitamin A 12-59 months coverage (annualised) 55.0% 55.0% 55.4%

District Hospitals

National Core Standards self assessment rate 75.0% 75.0% 0%
 Quality improvement plan after self assessment rate 100.0% 100.0% 0%
 Percentage of Hospitals compliant with all extreme and vital measures of the national core standards 35.0% 10.0% 0%
 Patient Experience of Care Survey Rate 100.0% 100.0% 0%
 Average Length of Stay 4.9 days 4.9 days 5.3 days
 Inpatient Bed Utilisation Rate 65.0% 65.0% 58.1%
 Expenditure per PDE R 2,166 R 2,166 R 1,811
 Complaints resolution rate 95.0% 95.0% 99.0%
 Complaint resolution within 25 working days rate 90.0% 90.0% 101.0%

Disease Prevention and Control

Clients screened for hypertension-25 years and older 80,000 10,000 408,713
 Clients screened for diabetes- 5 years and older 80,000 10,000 263,028
 Client screened for Mental disorders 1.1% 1.1% 0.7%
 Client treated for Mental Disorders new 10.0% 2.5% 14.8%
 Cataract Surgery Rate annualised not measured - -
 Malaria case fatality rate not measured - 0%

Programme 3: Emergency Medical Services

EMS P1 urban response under 15 minutes rate 6,600.0% 66.0% 66.1%
EMS P1 rural response under 40 minutes rate 66.0% 66.0% 42.5%
 EMS inter-facility transfer rate 30.0% 30.0% 22.1%

Programme 4: Provincial Hospital Services

General (regional) hospitals

National Core Standards self assessment rate 75.0% 75.0% 0%
 Quality improvement plan after self assessment rate 100.0% 100.0% 0%
 Percentage of Hospitals compliant with all extreme and vital measures of the national core standards 35.0% 35.0% 0%
 Patient Experience of Care Survey Rate 70.0% - 0%

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EASTERN CAPE

Sector: Health

Programme / Subprogramme / Performance Measures

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QUARTERLY OUTPUTS

Average Length of Stay	4.6 days	4.6 days	5.4 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	68.0%
Expenditure per PDE	R 2,181	R 2,181	R 1,347
Complaints resolution rate	90.0%	90.0%	91.3%
Complaint resolution within 25 working days rate	80.0%	80.0%	100.0%
Programme 5: Central Hospital Services	0%	0%	0%
Provincial Tertiary Hospitals			
National Core Standards self assessment rate	100.0%	100.0%	0%
Quality improvement plan after self assessment rate	100.0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	100.0%	0%
Patient Experience of Care Survey Rate	80.0%	50.0%	0%
Average Length of Stay	5.5 days	5.5 days	6.7 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	77.2%
Expenditure per PDE	R 2,019	R 2,019	R 2,966
Complaints resolution rate	80.0%	80.0%	100.0%
Complaint resolution within 25 working days rate	90.0%	90.0%	100.0%
Central Hospital Services			
National Core Standards self assessment rate	100.0%	100.0%	0%
Quality improvement plan after self assessment rate	100.0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	100.0%	0%
Patient Experience of Care Survey Rate	80.0%	60.0%	0%
Average Length of Stay	5.5 days	5.5 days	7.5 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	91.3%
Expenditure per PDE	R 2,019	R 2,019	R 4,116
Complaints resolution rate	80.0%	80.0%	100.0%
Complaint resolution within 25 working days rate	90.0%	90.0%	100.0%

1. Information submitted by: Dr T. Mbengashe Head of Department: Health Eastern Cape: Tel: (040) 608 1114

Ms N.T.M. Mbina-Mthembu Director General: Office of the Premier Eastern Cape

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter

FREE STATE

Sector: Health

Programme / Subprogramme / Performance Measures

**Target for
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QUARTERLY OUTPUTS

Programme 1: Administration

Percentage of Hospitals with broadband access
Percentage of fixed PHC facilities with broadband access

25.0%
75.0%

0%
0%

0%
0%

Programme 2: District Health Services

District Management

Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard
Patient Experience of Care rate (PHC Facilities)
Number of Districts with District Clinical Specialist Teams (DCSTs)
PHC utilisation rate
Complaints resolution rate
Complaint resolution within 25 working days rate

10.0%
85.0%
5
3.0
85.0%
85.0%

2.0%
85.0%
5
3.0
85.0%
85.0%

8.2%
0%
5
2.4
95.3%
89.0%

HIV and AIDS, TB and STI control

Total clients remaining on ART
Client tested for HIV (incl ANC)
TB symptom 5yrs and older screened rate
Male condom distribution Rate (annualised)
Female condom distribution Rate (annualised)
Medical male circumcision performed - Total
TB new client treatment success rate
TB client lost to follow up rate

191,180
606,343
65.0%
46
1
74 496
84.0%
4.5%

172,632
151,585
65.0%
46
1
11 640
84.0%
4.5%

171,479
121,715
89.3%
20
1
5 145
71.4%
4.7%

Maternal, child and women health

Antenatal 1st visit before 20 weeks rate
Mother postnatal visit within 6 days rate
Infant 1st PCR test positive around 6 weeks rate
Immunisation coverage under 1 year (annualised)
Measles 2nd dose coverage (annualised)
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate
Child under 5 years diarrhoea case fatality rate
Child under 5 years pneumonia case fatality rate
Child under 5 years severe acute malnutrition case fatality rate
School Grade R screening coverage (annualised)
School Grade 1 screening coverage (annualised)
School Grade 8 screening coverage (annualised)
Couple year protection rate (annualised)
Cervical cancer screening coverage (annualised)
Vitamin A 12-59 months coverage (annualised)

65.0%
82.0%
<2%
95.0%
85.0%
<10%
<3%
<3%
11.4%
30.0%
40.0%
35.0%
55.0%
60.0%
60.0%

65.0%
82.0%
<2%
95.0%
85.0%
<10%
<3%
<3%
11.4%
30.0%
40.0%
35.0%
55.0%
60.0%
60.0%

62.2%
71.3%
2.1%
76.2%
81.7%
24.4%
2.9%
1.3%
9.3%
32.8%
43.5%
38.5%
37.3%
48.3%
64.5%

District Hospitals

National Core Standards self assessment rate
Quality improvement plan after self assessment rate
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards
Patient Experience of Care Survey Rate
Average Length of Stay
Inpatient Bed Utilisation Rate
Expenditure per PDE
Complaints resolution rate
Complaint resolution within 25 working days rate

50.0%
50.0%
50.0%
85.0%
3.5 days
70.0%
R 2,000
85.0%
85.0%

10.0%
10.0%
0%
85.0%
3.5 days
70.0%
R 2,000
85.0%
85.0%

0%
0%
0%
45.8%
3.3 days
56.9%
R 1,637
94.0%
83.0%

Disease Prevention and Control

Clients screened for hypertension-25 years and older
Clients screened for diabetes- 5 years and older
Client screened for Mental disorders
Client treated for Mental Disorders new
Cataract Surgery Rate annualised
Malaria case fatality rate

630,673
630,673
20.0%
90.0%
1,535.0
0%

157,688
157,688
20.0%
90.0%
1,535.0
0%

112,635
68,432
3.6%
2.1%
824.0
0%

Programme 3: Emergency Medical Services

EMS P1 urban response under 15 minutes rate
EMS P1 rural response under 40 minutes rate
EMS inter-facility transfer rate

50.0%
68.0%
12.0%

50.0%
68.0%
12.0%

30.4%
63.1%
9.7%

Programme 4: Provincial Hospital Services

General (regional) hospitals

National Core Standards self assessment rate
Quality improvement plan after self assessment rate
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards
Patient Experience of Care Survey Rate

100.0%
100.0%
50.0%
85.0%

25.0%
25.0%
0%
85.0%

0%
0%
0%
100.0%

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter

FREE STATE

Sector: Health

Programme / Subprogramme / Performance Measures

	Target for 2015/16 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Average Length of Stay	5.0 days	5.0 days	5.3 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	66.1%
Expenditure per PDE	R 2,480	R 2,480	R 1,851
Complaints resolution rate	85.0%	85.0%	97.7%
Complaint resolution within 25 working days rate	85.0%	85.0%	100.0%
Programme 5: Central Hospital Services	0%	0%	0%
Provincial Tertiary Hospitals			
National Core Standards self assessment rate	100.0%	0%	0%
Quality improvement plan after self assessment rate	100.0%	0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	0%	0%	0%
Patient Experience of Care Survey Rate	85.0%	85.0%	100.0%
Average Length of Stay	8.5 days	8.5 days	6.3 days
Inpatient Bed Utilisation Rate	80.0%	80.0%	79.3%
Expenditure per PDE	R 2,800	R 2,800	R 2,246
Complaints resolution rate	85.0%	85.0%	95.0%
Complaint resolution within 25 working days rate	85.0%	85.0%	42.1%
Central Hospital Services			
National Core Standards self assessment rate	100.0%	0%	0%
Quality improvement plan after self assessment rate	100.0%	0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	0%	0%
Patient Experience of Care Survey Rate	85.0%	85.0%	100.0%
Average Length of Stay	7.5 days	7.5 days	7.2 days
Inpatient Bed Utilisation Rate	77.0%	77.0%	74.4%
Expenditure per PDE	R 4,652	R 4,652	R 4,191
Complaints resolution rate	85.0%	85.0%	100.0%
Complaint resolution within 25 working days rate	85.0%	85.0%	100.0%

1. Information submitted by: Dr. D. Motau Head of Department: Health Free State: Tel: (051) 408 1107

Mr. K. Ralikontsane Director General: Office of the Premier Free State

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter

GAUTENG

Sector: Health

Programme / Subprogramme / Performance Measures

**Target for
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**1st Quarter
Planned output
as per APP**

**1st Quarter
Preliminary
output**

QUARTERLY OUTPUTS

Programme 1: Administration

Percentage of Hospitals with broadband access
Percentage of fixed PHC facilities with broadband access

50.0%
1.0%

28.0%
0%

0%
0%

Programme 2: District Health Services

District Management

Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard
Patient Experience of Care rate (PHC Facilities)
Number of Districts with District Clinical Specialist Teams (DCSTs)
PHC utilisation rate
Complaints resolution rate
Complaint resolution within 25 working days rate

1.3%
100.0%
5
2.5
90.0%
80.0%

0.3%
0%
5
-
0%
0%

2.8%
0%
5
1.7
82.4%
92.6%

HIV and AIDS, TB and STI control

Total clients remaining on ART
Client tested for HIV (incl ANC)
TB symptom 5yrs and older screened rate
Male condom distribution Rate (annualised)
Female condom distribution Rate (annualised)
Medical male circumcision performed - Total
TB new client treatment success rate
TB client lost to follow up rate

746,678
2,119,906
30.0%
919,782,721
4,097,926
151 082
86.0%
<5%

674,169
529,976
24.0%
47,945,680
1,024,481
37 770
86.0%
<5%

669,054
667,698
27.1%
40
1
-
87.5%
5.1%

Maternal, child and women health

Antenatal 1st visit before 20 weeks rate
Mother postnatal visit within 6 days rate
Infant 1st PCR test positive around 6 weeks rate
Immunisation coverage under 1 year (annualised)
Measles 2nd dose coverage (annualised)
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate
Child under 5 years diarrhoea case fatality rate
Child under 5 years pneumonia case fatality rate
Child under 5 years severe acute malnutrition case fatality rate
School Grade R screening coverage (annualised)
School Grade 1 screening coverage (annualised)
School Grade 8 screening coverage (annualised)
Couple year protection rate (annualised)
Cervical cancer screening coverage (annualised)
Vitamin A 12-59 months coverage (annualised)

55.0%
87.0%
<2%
90.0%
90.0%
<10%
3.0%
2.5%
7.0%
10.0%
40.0%
20.0%
50.0%
55.0%
0%

55.0%
87.0%
<2%
90.0%
90.0%
<10%
3.0%
2.5%
7.0%
10.0%
40.0%
20.0%
50.0%
55.0%
60.0%

49.1%
100.4%
1.4%
106.8%
83.7%
0%
2.2%
1.3%
13.0%
0%
48.6%
25.5%
43.3%
42.6%
42.1%

District Hospitals

National Core Standards self assessment rate
Quality improvement plan after self assessment rate
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards
Patient Experience of Care Survey Rate
Average Length of Stay
Inpatient Bed Utilisation Rate
Expenditure per PDE
Complaints resolution rate
Complaint resolution within 25 working days rate

100.0%
80.0%
27.0%
100.0%
4.0 days
80.0%
R 2,500
80.0%
68.0%

100.0%
80.0%
27.0%
0%
4.0 days
80.0%
R 2,500
80.0%
68.0%

36.4%
25.0%
0%
0%
4.2 days
36.5%
R 2,036
91.3%
100.0%

Disease Prevention and Control

Clients screened for hypertension-25 years and older
Clients screened for diabetes- 5 years and older
Client screened for Mental disorders
Client treated for Mental Disorders new
Cataract Surgery Rate annualised
Malaria case fatality rate

58,800
58,800
2.0%
3.0%
1300mil
<0.3%

14,000
14,000
2.0%
3.0%
1300mil
<0.3%

11,420
11,420
0.9%
136.2%
-
1.7%

Programme 3: Emergency Medical Services

EMS P1 urban response under 15 minutes rate
EMS P1 rural response under 40 minutes rate
EMS inter-facility transfer rate

85.0%
100.0%
12.0%

85.0%
100.0%
10.5%

80.9%
63.8%
24.5%

Programme 4: Provincial Hospital Services

General (regional) hospitals

National Core Standards self assessment rate
Quality improvement plan after self assessment rate
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards
Patient Experience of Care Survey Rate

100.0%
0%
33.0%
100.0%

100.0%
35.0%
22.0%
0%

33.3%
33.3%
0%
0%

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter

GAUTENG

Sector: Health

Programme / Subprogramme / Performance Measures

	Target for 2015/16 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Average Length of Stay	4.8 days	4.8 days	5.2 days
Inpatient Bed Utilisation Rate	80.0%	80.0%	41.7%
Expenditure per PDE	R 2,250	R 2,250	R 2,241
Complaints resolution rate	86.0%	86.0%	88.5%
Complaint resolution within 25 working days rate	80.0%	80.0%	100.0%
Programme 5: Central Hospital Services	0%	0%	0%
Provincial Tertiary Hospitals			
National Core Standards self assessment rate	100.0%	33.0%	33.3%
Quality improvement plan after self assessment rate	100.0%	33.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	33.0%	0%	0%
Patient Experience of Care Survey Rate	100.0%	0%	0%
Average Length of Stay	5.4 days	5.4 days	6.1 days
Inpatient Bed Utilisation Rate	82.0%	80.0%	41.1%
Expenditure per PDE	R 2,625	R 2,625	R 2,992
Complaints resolution rate	85.6%	85.6%	94.0%
Complaint resolution within 25 working days rate	68.0%	68.0%	100.0%
Central Hospital Services			
National Core Standards self assessment rate	100.0%	100.0%	50.0%
Quality improvement plan after self assessment rate	100.0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	75.0%	0%	0%
Patient Experience of Care Survey Rate	100.0%	0%	0%
Average Length of Stay	6.0 days	6.0 days	5.5 days
Inpatient Bed Utilisation Rate	80.0%	80.0%	40.0%
Expenditure per PDE	R 2,250	R 2,250	R 3,462
Complaints resolution rate	80.0%	80.0%	88.5%
Complaint resolution within 25 working days rate	90.0%	90.0%	97.7%

1. Information submitted by: Dr T.E. Silibane Head of Department: Health Gauteng: Tel (011) 355 3857

Ms. P. Baleni Director General: Office of the Premier Gauteng

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter
KWAZULU-NATAL
Sector: Health
Programme / Subprogramme / Performance Measures

	Target for 2015/16 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 1: Administration			
Percentage of Hospitals with broadband access	90.0%	50.0%	47.4%
Percentage of fixed PHC facilities with broadband access	45.0%	32.0%	3.5%
Programme 2: District Health Services			
District Management			
Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard	20.0%	8.0%	0%
Patient Experience of Care rate (PHC Facilities)	100.0%	25.0%	4.8%
Number of Districts with District Clinical Specialist Teams (DCSTs)	2	1	-
PHC utilisation rate	3.0	3.0	2.9
Complaints resolution rate	80.0%	77.0%	74.5%
Complaint resolution within 25 working days rate	90.0%	90.0%	95.4%
HIV and AIDS, TB and STI control			
Total clients remaining on ART	1,276,200	1,097,968	954,492
Client tested for HIV (incl ANC)	2,067,065	516,766	551,396
TB symptom 5yrs and older screened rate	20.0%	5.0%	0%
Male condom distribution Rate (annualised)	63	16	35
Female condom distribution Rate (annualised)	1	1	1
Medical male circumcision performed - Total	631 374	460 000	32 856
TB new client treatment success rate	85.0%	85.0%	76.9%
TB client lost to follow up rate	3.9%	3.9%	4.1%
Maternal, child and women health			
Antenatal 1st visit before 20 weeks rate	60.0%	57.0%	59.6%
Mother postnatal visit within 6 days rate	74.4%	72.0%	66.3%
Infant 1st PCR test positive around 6 weeks rate	<1	1.4%	1.9%
Immunisation coverage under 1 year (annualised)	90.0%	89.0%	91.0%
Measles 2nd dose coverage (annualised)	85.0%	79.0%	87.3%
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate	7.0%	8.0%	5.4%
Child under 5 years diarrhoea case fatality rate	3.2%	3.3%	3.5%
Child under 5 years pneumonia case fatality rate	2.4%	3.0%	3.2%
Child under 5 years severe acute malnutrition case fatality rate	8.0%	8.0%	11.6%
School Grade R screening coverage (annualised)	40.0%	35.0%	2.0%
School Grade 1 screening coverage (annualised)	55.0%	42.0%	27.6%
School Grade 8 screening coverage (annualised)	40.0%	35.0%	15.3%
Couple year protection rate (annualised)	55.0%	46.0%	40.9%
Cervical cancer screening coverage (annualised)	75.0%	75.0%	79.9%
Vitamin A 12-59 months coverage (annualised)	60.0%	50.0%	75.2%
District Hospitals			
National Core Standards self assessment rate	100.0%	25.0%	7.9%
Quality improvement plan after self assessment rate	100.0%	25.0%	133.3%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	14.0%	0%	0%
Patient Experience of Care Survey Rate	100.0%	25.0%	34.2%
Average Length of Stay	5.8 days	5.8 days	5.8 days
Inpatient Bed Utilisation Rate	64.7%	64.0%	62.4%
Expenditure per PDE	R 1,808	R 1,930	R 1,651
Complaints resolution rate	75.0%	75.0%	77.5%
Complaint resolution within 25 working days rate	85.0%	85.0%	86.7%
Disease Prevention and Control			
Clients screened for hypertension-25 years and older	establish b/l	establish b/l	1,258,013
Clients screened for diabetes- 5 years and older	establish b/l	establish b/l	765,762
Client screened for Mental disorders	establish b/l	establish b/l	1.2%
Client treated for Mental Disorders new	establish b/l	establish b/l	1.7%
Cataract Surgery Rate annualised	930.0	233.0	575.0
Malaria case fatality rate	<0.5	<0.5	0.8%
Programme 3: Emergency Medical Services			
EMS P1 urban response under 15 minutes rate	6.5%	6.0%	4.8%
EMS P1 rural response under 40 minutes rate	33.0%	31.0%	32.6%
EMS inter-facility transfer rate	37.0%	32.0%	40.7%
Programme 4: Provincial Hospital Services			
General (regional) hospitals			
National Core Standards self assessment rate	100.0%	25.0%	21.4%
Quality improvement plan after self assessment rate	100.0%	25.0%	166.7%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	23.0%	10.0%	0%
Patient Experience of Care Survey Rate	100.0%	25.0%	50.0%

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter
KWAZULU-NATAL

Sector: Health

Programme / Subprogramme / Performance Measures

**Target for
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**1st Quarter
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output**

QUARTERLY OUTPUTS

Average Length of Stay	6.1 days	6.1 days	6.2 days
Inpatient Bed Utilisation Rate	76.1%	76.7%	73.4%
Expenditure per PDE	R 2,225	R 2,300	R 2,123
Complaints resolution rate	80.0%	80.0%	78.5%
Complaint resolution within 25 working days rate	95.0%	94.0%	100.0%
Programme 5: Central Hospital Services	0%	0%	0%
Provincial Tertiary Hospitals			
National Core Standards self assessment rate	100.0%	50.0%	50.0%
Quality improvement plan after self assessment rate	100.0%	50.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	50.0%	0%	0%
Patient Experience of Care Survey Rate	100.0%	50.0%	50.0%
Average Length of Stay	9.6 days	9.9 days	10.4 days
Inpatient Bed Utilisation Rate	84.0%	84.0%	89.7%
Expenditure per PDE	R 4,377	R 5,000	R 6,038
Complaints resolution rate	78.0%	74.5%	73.7%
Complaint resolution within 25 working days rate	100.0%	100.0%	100.0%
Central Hospital Services			
National Core Standards self assessment rate	100.0%	0%	0%
Quality improvement plan after self assessment rate	100.0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	0%	0%
Patient Experience of Care Survey Rate	100.0%	0%	0%
Average Length of Stay	8.5 days	8.5 days	8.7 days
Inpatient Bed Utilisation Rate	70.0%	69.0%	66.7%
Expenditure per PDE	R 7,651	R 7,651	R 6,478
Complaints resolution rate	80.0%	75.0%	0%
Complaint resolution within 25 working days rate	100.0%	100.0%	0%

1. Information submitted by: Dr S.T. Mjoli Head of Department: Health KwaZulu Natal Tel: (033) 395 2799

Mr. N. Ngidi Director General: Office of the Premier KwaZulu Natal

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter
LIMPOPO
Sector: Health
Programme / Subprogramme / Performance Measures
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QUARTERLY OUTPUTS
Programme 1: Administration

Percentage of Hospitals with broadband access

100.0%

100.0%

100.0%

Percentage of fixed PHC facilities with broadband access

30.0%

5.0%

18.0%

Programme 2: District Health Services
District Management

Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard

10.0%

2.0%

5.0%

Patient Experience of Care rate (PHC Facilities)

70.0%

N/A

0%

Number of Districts with District Clinical Specialist Teams (DCSTs)

5

5

-

PHC utilisation rate

2.8

2.8

2.5

Complaints resolution rate

100.0%

100.0%

81.6%

Complaint resolution within 25 working days rate

94.0%

94.0%

97.7%

HIV and AIDS, TB and STI control

Total clients remaining on ART

248,500

221,500

232,562

Client tested for HIV (incl ANC)

995,342

248,836

329,062

TB symptom 5yrs and older screened rate

70.0%

70.0%

70.0%

Male condom distribution Rate (annualised)

36

36

37

Female condom distribution Rate (annualised)

1

1

0

Medical male circumcision performed - Total

62 000

4 000

10 514

TB new client treatment success rate

7,605.0%

76.5%

76.6%

TB client lost to follow up rate

<5

<5

4.4%

Maternal, child and women health

Antenatal 1st visit before 20 weeks rate

46.0%

46.0%

42.6%

Mother postnatal visit within 6 days rate

75.0%

75.0%

64.9%

Infant 1st PCR test positive around 6 weeks rate

<1

<1

2.5%

Immunisation coverage under 1 year (annualised)

90.0%

90.0%

78.0%

Measles 2nd dose coverage (annualised)

85.0%

85.0%

72.4%

DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate

15.0%

18.0%

15.4%

Child under 5 years diarrhoea case fatality rate

5.0%

5.0%

4.9%

Child under 5 years pneumonia case fatality rate

4.5%

4.5%

2.7%

Child under 5 years severe acute malnutrition case fatality rate

15.0%

15.0%

16.8%

School Grade R screening coverage (annualised)

20.0%

10.0%

0%

School Grade 1 screening coverage (annualised)

20.0%

10.0%

23.1%

School Grade 8 screening coverage (annualised)

20.0%

10.0%

4.6%

Couple year protection rate (annualised)

46.0%

46.0%

42.0%

Cervical cancer screening coverage (annualised)

57.0%

57.0%

44.5%

Vitamin A 12-59 months coverage (annualised)

38.0%

38.0%

43.6%

District Hospitals

National Core Standards self assessment rate

100.0%

23.0%

23.0%

Quality improvement plan after self assessment rate

100.0%

23.0%

16.7%

Percentage of Hospitals compliant with all extreme and vital measures of the national core standards

66.7%

16.7%

0%

Patient Experience of Care Survey Rate

100.0%

N/A

0%

Average Length of Stay

4.3 days

4.3 days

4.3 days

Inpatient Bed Utilisation Rate

72.0%

72.0%

67.2%

Expenditure per PDE

R 2,200

R 2,200

R 2,764

Complaints resolution rate

100.0%

100.0%

88.5%

Complaint resolution within 25 working days rate

100.0%

100.0%

94.9%

Disease Prevention and Control

Clients screened for hypertension-25 years and older

250,000

62,500

144,378

Clients screened for diabetes- 5 years and older

200,000

50,000

152,695

Client screened for Mental disorders

28.0%

28.0%

0%

Client treated for Mental Disorders new

28.0%

28.0%

0%

Cataract Surgery Rate annualised

1,500.0

375.0

660.0

Malaria case fatality rate

1.2%

1.2%

0.7%

Programme 3: Emergency Medical Services

EMS P1 urban response under 15 minutes rate

59.5%

50.0%

87.7%

EMS P1 rural response under 40 minutes rate

61.5%

53.0%

72.1%

EMS inter-facility transfer rate

7.9%

7.9%

22.9%

Programme 4: Provincial Hospital Services
General (regional) hospitals

National Core Standards self assessment rate

100.0%

40.0%

40.0%

Quality improvement plan after self assessment rate

100.0%

40.0%

20.0%

Percentage of Hospitals compliant with all extreme and vital measures of the national core standards

40.0%

40.0%

0%

Patient Experience of Care Survey Rate

100.0%

N/A

0%

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter

LIMPOPO

Sector: Health

Programme / Subprogramme / Performance Measures

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QUARTERLY OUTPUTS

Average Length of Stay	5.0 days	5.0 days	5.1 days
Inpatient Bed Utilisation Rate	68.0%	68.0%	71.6%
Expenditure per PDE	R 2.697	R 2.697	R 2.697
Complaints resolution rate	100.0%	100.0%	100.0%
Complaint resolution within 25 working days rate	100.0%	100.0%	99.3%
Programme 5: Central Hospital Services	0%	0%	0%
Provincial Tertiary Hospitals			
National Core Standards self assessment rate	100.0%	50.0%	50.0%
Quality improvement plan after self assessment rate	100.0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	50.0%	0%
Patient Experience of Care Survey Rate	100.0%	N/A	0%
Average Length of Stay	7.0 days	7.0 days	7.0 days
Inpatient Bed Utilisation Rate	77.0%	77.0%	76.8%
Expenditure per PDE	R 3.600	R 3.600	R 4.120
Complaints resolution rate	100.0%	100.0%	100.0%
Complaint resolution within 25 working days rate	95.0%	95.0%	98.8%
Central Hospital Services			
National Core Standards self assessment rate			
Quality improvement plan after self assessment rate			
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards			
Patient Experience of Care Survey Rate			
Average Length of Stay			
Inpatient Bed Utilisation Rate			
Expenditure per PDE			
Complaints resolution rate			
Complaint resolution within 25 working days rate			

1. Information submitted by: Ms S. Kabane Head of Department: Health Limpopo: Tel: (015) 2936294

Dr. P. Pheme Director General Office of the Premier Limpopo

* This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter

MPUMALANGA

Sector: Health

Programme / Subprogramme / Performance Measures

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QUARTERLY OUTPUTS

Programme 1: Administration

Percentage of Hospitals with broadband access

100.0%

100.0%

100.0%

Percentage of fixed PHC facilities with broadband access

50.0%

35.0%

35.8%

Programme 2: District Health Services

District Management

Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard

10% (28/279)

Annual Target

0%

Patient Experience of Care rate (PHC Facilities)

75.0%

Annual Target

0%

Number of Districts with District Clinical Specialist Teams (DCSTs)

1

Annual Target

-

PHC utilisation rate

2.5

2.5

2.3

Complaints resolution rate

85.0%

85.0%

49.8%

Complaint resolution within 25 working days rate

85.0%

85.0%

88.8%

HIV and AIDS, TB and STI control

Total clients remaining on ART

354,991

88,745

285,680

Client tested for HIV (incl ANC)

1,949,598

487,399

269,295

TB symptom 5yrs and older screened rate

>95%

>95%

4.4%

Male condom distribution Rate (annualised)

20 per male

20 per male

73

Female condom distribution Rate (annualised)

1,238,628

309,657

1

Medical male circumcision performed - Total

150 000

35 000

12 417

TB new client treatment success rate

>85%

>85%

76.6%

TB client lost to follow up rate

<5%

<5%

4.8%

Maternal, child and women health

Antenatal 1st visit before 20 weeks rate

55.0%

51.3%

58.1%

Mother postnatal visit within 6 days rate

60.0%

52.5%

61.7%

Infant 1st PCR test positive around 6 weeks rate

<2%

<2%

1.1%

Immunisation coverage under 1 year (annualised)

90.0%

90.0%

85.7%

Measles 2nd dose coverage (annualised)

90.0%

90.0%

69.8%

DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate

<15%

<15%

0%

Child under 5 years diarrhoea case fatality rate

11.5%

12.0%

4.7%

Child under 5 years pneumonia case fatality rate

5.5%

5.5%

3.4%

Child under 5 years severe acute malnutrition case fatality rate

11.5%

12.0%

20.3%

School Grade R screening coverage (annualised)

2.0%

0.5%

0%

School Grade 1 screening coverage (annualised)

24.0%

21.0%

9.9%

School Grade 8 screening coverage (annualised)

10.0%

6.3%

2.5%

Couple year protection rate (annualised)

45.0%

45.0%

63.0%

Cervical cancer screening coverage (annualised)

70.0%

62.5%

61.1%

Vitamin A 12-59 months coverage (annualised)

50.0%

45.0%

38.6%

District Hospitals

National Core Standards self assessment rate

100.0%

Annual Target

0%

Quality improvement plan after self assessment rate

100.0%

Annual Target

0%

Percentage of Hospitals compliant with all extreme and vital measures of the national core standards

25.0%

Annual Target

0%

Patient Experience of Care Survey Rate

100.0%

Annual Target

0%

Average Length of Stay

3.7 days

3.7 days

4.6 days

Inpatient Bed Utilisation Rate

73.5%

73.5%

35.9%

Expenditure per PDE

R 1,985

R 1,985

R 1,520

Complaints resolution rate

95.0%

95.0%

61.3%

Complaint resolution within 25 working days rate

95.0%

95.0%

93.1%

Disease Prevention and Control

Clients screened for hypertension-25 years and older

70,000

20,000

2,901

Clients screened for diabetes- 5 years and older

70,000

20,000

1,437

Client screened for Mental disorders

0.5%

0.5%

0%

Client treated for Mental Disorders new

0.5%

0.5%

0%

Cataract Surgery Rate annualised

1,000.0

1,000.0

474.5

Malaria case fatality rate

0.5%

5.0%

0%

Programme 3: Emergency Medical Services

EMS P1 urban response under 15 minutes rate

85.0%

85.0%

6.0%

EMS P1 rural response under 40 minutes rate

75.0%

75.0%

0.2%

EMS inter-facility transfer rate

10.0%

10.0%

0.0%

Programme 4: Provincial Hospital Services

General (regional) hospitals

National Core Standards self assessment rate

100.0%

Annual Target

0%

Quality improvement plan after self assessment rate

100.0%

Annual Target

0%

Percentage of Hospitals compliant with all extreme and vital measures of the national core standards

100.0%

Annual Target

0%

Patient Experience of Care Survey Rate

100.0%

Annual Target

0%

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter

MPUMALANGA

Sector: Health

Programme / Subprogramme / Performance Measures

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QUARTERLY OUTPUTS

Average Length of Stay	4.7 days	4.7 days	4.5 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	40.3%
Expenditure per PDE	R 2,568	R 2,368	R 2,091
Complaints resolution rate	85.0%	85.0%	51.8%
Complaint resolution within 25 working days rate	85.0%	85.0%	100.0%
Programme 5: Central Hospital Services	0%	0%	0%
Provincial Tertiary Hospitals			
National Core Standards self assessment rate	100.0%	Annual Target	0%
Quality improvement plan after self assessment rate	100.0%	Annual Target	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	Annual Target	0%
Patient Experience of Care Survey Rate	85.0%	Annual Target	0%
Average Length of Stay	5.3 days	5.3 days	5.6 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	18.2%
Expenditure per PDE	R 3,221	R 3,000	R 3,202
Complaints resolution rate	85.0%	85.0%	91.7%
Complaint resolution within 25 working days rate	85.0%	85.0%	90.9%
Central Hospital Services			
National Core Standards self assessment rate			
Quality improvement plan after self assessment rate			
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards			
Patient Experience of Care Survey Rate			
Average Length of Stay			
Inpatient Bed Utilisation Rate			
Expenditure per PDE			
Complaints resolution rate			
Complaint resolution within 25 working days rate			

1. Information submitted by: Dr. A.M. Morake Head of Department: Health Mpumalanga: Tel (013) 766 3298

Dr. N. Mkhize Director General: Office of the Premier Mpumalanga

*This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter

NORTHERN CAPE

Sector: Health

Programme / Subprogramme / Performance Measures

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QUARTERLY OUTPUTS

Programme 1: Administration

Percentage of Hospitals with broadband access
Percentage of fixed PHC facilities with broadband access

30.0% 30.0% 7.1%
26.0% 0% 0%

Programme 2: District Health Services

District Management

Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard
Patient Experience of Care rate (PHC Facilities)
Number of Districts with District Clinical Specialist Teams (DCSTs)
PHC utilisation rate
Complaints resolution rate
Complaint resolution within 25 working days rate

27.0% 7.0% 0%
80.0% 80.0% 0%
1 1 -
3.0 3.0 2.5
80.0% 80.0% 48.0%
80.0% 80.0% 103.3%

HIV and AIDS, TB and STI control

Total clients remaining on ART
Client tested for HIV (incl ANC)
TB symptom 5yrs and older screened rate
Male condom distribution Rate (annualised)
Female condom distribution Rate (annualised)
Medical male circumcision performed - Total
TB new client treatment success rate
TB client lost to follow up rate

52,999 46,959 35,703
241,037 67,490 48,621
30.0% 30.0% 42.5%
37 37 13
1 1 0
24 279 5 794 840
95.0% 95.0% 13.1%
6.0% 6.0% 5.5%

Maternal, child and women health

Antenatal 1st visit before 20 weeks rate
Mother postnatal visit within 6 days rate
Infant 1st PCR test positive around 6 weeks rate
Immunisation coverage under 1 year (annualised)
Measles 2nd dose coverage (annualised)
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate
Child under 5 years diarrhoea case fatality rate
Child under 5 years pneumonia case fatality rate
Child under 5 years severe acute malnutrition case fatality rate
School Grade R screening coverage (annualised)
School Grade 1 screening coverage (annualised)
School Grade 8 screening coverage (annualised)
Couple year protection rate (annualised)
Cervical cancer screening coverage (annualised)
Vitamin A 12-59 months coverage (annualised)

62.0% 62.0% 57.1%
55.0% 50.0% 53.9%
1.9% 1.9% 2.8%
98.0% 98.0% 84.1%
85.0% 85.0% 67.4%
<20% <20% 12.5%
2.8/1000 2.8/1000 1.5%
2.8/1000 2.8/1000 0.7%
10.0% 10.0% 5.9%
30.0% 30.0% 0%
30.0% 30.0% 24.9%
25.0% 25.0% 16.2%
45.0% 45.0% 21.3%
55.0% 55.0% 43.1%
42.0% 42.0% 44.7%

District Hospitals

National Core Standards self assessment rate
Quality improvement plan after self assessment rate
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards
Patient Experience of Care Survey Rate
Average Length of Stay
Inpatient Bed Utilisation Rate
Expenditure per PDE
Complaints resolution rate
Complaint resolution within 25 working days rate

100.0% 100.0% 0%
100.0% 100.0% 0%
27.0% 9.0% 0%
80.0% 80.0% 0%
3.5 days 3.5 days 3.4 days
63.0% 63.0% 61.6%
R 1,720 R 1,720 R 2,076
80.0% 80.0% 61.5%
80.0% 80.0% 118.8%

Disease Prevention and Control

Clients screened for hypertension-25 years and older
Clients screened for diabetes- 5 years and older
Client screened for Mental disorders
Client treated for Mental Disorders new
Cataract Surgery Rate annualised
Malaria case fatality rate

108,759 27,951 30,896
108,759 27,951 11,376
15.0% 15.0% 0.3%
2.0% 2.0% 0%
1395/1000000 349/1000000 462.9
0% 0% 0%

Programme 3: Emergency Medical Services

EMS P1 urban response under 15 minutes rate
EMS P1 rural response under 40 minutes rate
EMS inter-facility transfer rate

60.0% 60.0% 65.9%
40.0% 40.0% 54.4%
10.0% 10.0% 13.8%

Programme 4: Provincial Hospital Services

General (regional) hospitals

National Core Standards self assessment rate
Quality improvement plan after self assessment rate
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards
Patient Experience of Care Survey Rate

100.0% 100.0% 0%
100.0% 100.0% 0%
100.0% 100.0% 0%
80.0% 80.0% 0%

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter
NORTHERN CAPE

Sector: Health

Programme / Subprogramme / Performance Measures

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QUARTERLY OUTPUTS

Average Length of Stay	4.8 days	4.8 days	4.6 days
Inpatient Bed Utilisation Rate	72.0%	72.0%	101.3%
Expenditure per PDE	R 2,570	R 2,570	R 3,982
Complaints resolution rate	80.0%	80.0%	57.1%
Complaint resolution within 25 working days rate	80.0%	80.0%	100.0%

Programme 5: Central Hospital Services

Provincial Tertiary Hospitals

National Core Standards self assessment rate	100.0%	100.0%	0%
Quality improvement plan after self assessment rate	100.0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	100.0%	0%
Patient Experience of Care Survey Rate	80.0%	80.0%	0%
Average Length of Stay	5.5 days	5.5 days	6.0 days
Inpatient Bed Utilisation Rate	74.0%	74.0%	72.3%
Expenditure per PDE	R 3,736	R 3,736	R 4,021
Complaints resolution rate	80.0%	80.0%	0%
Complaint resolution within 25 working days rate	80.0%	80.0%	0%

Central Hospital Services

National Core Standards self assessment rate			
Quality improvement plan after self assessment rate			
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards			
Patient Experience of Care Survey Rate			
Average Length of Stay			
Inpatient Bed Utilisation Rate			
Expenditure per PDE			
Complaints resolution rate			
Complaint resolution within 25 working days rate			

1. Information submitted by: Ms G. Matlaopane Head of Department: Health Northern Cape: Tel: (053) 830 0806

Adv. J. Bekebeke Director General: Office of the Premier Northern Cape

*This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter

NORTH WEST

Sector: Health

Programme / Subprogramme / Performance Measures

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output**

QUARTERLY OUTPUTS

Programme 1: Administration

Percentage of Hospitals with broadband access
Percentage of fixed PHC facilities with broadband access

0%
0%

0%
0%

30.4%
0.6%

Programme 2: District Health Services

District Management

Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard
Patient Experience of Care rate (PHC Facilities)
Number of Districts with District Clinical Specialist Teams (DCSTs)
PHC utilisation rate
Complaints resolution rate
Complaint resolution within 25 working days rate

50.0%
85.0%
4
3.0
100.0%
85.0%

12.0%
0%
4
3.0
100.0%
85.0%

0%
0%
4
2.3
74.2%
104.3%

HIV and AIDS, TB and STI control

Total clients remaining on ART
Client tested for HIV (incl ANC)
TB symptom 5yrs and older screened rate
Male condom distribution Rate (annualised)
Female condom distribution Rate (annualised)
Medical male circumcision performed - Total
TB new client treatment success rate
TB client lost to follow up rate

243,331
541,499
90.0%
38
1
58 336
85.0%
<5

210,798
135,374
22.5%
38
1
14 584
85.0%
<5

172,501
45,608
22.9%
30
1
-
89.6%
6.0%

Maternal, child and women health

Antenatal 1st visit before 20 weeks rate
Mother postnatal visit within 6 days rate
Infant 1st PCR test positive around 6 weeks rate
Immunisation coverage under 1 year (annualised)
Measles 2nd dose coverage (annualised)
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate
Child under 5 years diarrhoea case fatality rate
Child under 5 years pneumonia case fatality rate
Child under 5 years severe acute malnutrition case fatality rate
School Grade R screening coverage (annualised)
School Grade 1 screening coverage (annualised)
School Grade 8 screening coverage (annualised)
Couple year protection rate (annualised)
Cervical cancer screening coverage (annualised)
Vitamin A 12-59 months coverage (annualised)

65.0%
85.0%
1.5%
90.0%
90.0%
6.0%
<3.3
<3.5
<10
20.0%
50.0%
35.0%
55.0%
66.0%
60.0%

58.0%
80.0%
1.5%
83.0%
90.0%
6.0%
<3.3
<3.5
<10
5.0%
50.0%
35.0%
55.0%
66.0%
45.0%

93.8%
64.7%
1.7%
83.7%
76.2%
60.9%
3.8%
2.8%
10.8%
0%
19.7%
10.7%
39.9%
68.6%
44.9%

District Hospitals

National Core Standards self assessment rate
Quality improvement plan after self assessment rate
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards
Patient Experience of Care Survey Rate
Average Length of Stay
Inpatient Bed Utilisation Rate
Expenditure per PDE
Complaints resolution rate
Complaint resolution within 25 working days rate

100.0%
100.0%
9.5%
100.0%
4.0 days
69.0%
R 2,400
100.0%
92.0%

100.0%
100.0%
0%
0%
4.0 days
69.0%
R 2,400
100.0%
92.0%

60.0%
0%
0%
0%
4.6 days
30.5%
R 3,980
92.1%
100.0%

Disease Prevention and Control

Clients screened for hypertension-25 years and older
Clients screened for diabetes- 5 years and older
Client screened for Mental disorders
Client treated for Mental Disorders new
Cataract Surgery Rate annualised
Malaria case fatality rate

-
-
64.0%
1,056.0%
900.0
0%

-
-
16.0%
264.0%
250.0
0%

114,215
59,549
0.5%
6.7%
300.5
5.7%

Programme 3: Emergency Medical Services

EMS P1 urban response under 15 minutes rate
EMS P1 rural response under 40 minutes rate
EMS inter-facility transfer rate

61.0%
61.0%
20.0%

61.0%
61.0%
20.0%

42.6%
52.1%
32.4%

Programme 4: Provincial Hospital Services

General (regional) hospitals

National Core Standards self assessment rate
Quality improvement plan after self assessment rate
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards
Patient Experience of Care Survey Rate

100.0%
100.0%
100.0%
100.0%

100.0%
0%
100.0%
100.0%

100.0%
0%
33.3%
0%

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter

NORTH WEST

Sector: Health

Programme / Subprogramme / Performance Measures

**Target for
2015/16 as per
Annual
Performance
Plan (APP)**

**1st Quarter
Planned output
as per APP**

**1st Quarter
Preliminary
output**

QUARTERLY OUTPUTS

Average Length of Stay	7.0 days	7.0 days	5.9 days
Inpatient Bed Utilisation Rate	85.0%	85.0%	46.5%
Expenditure per PDE	R 2,400	R 2,400	R 3,136
Complaints resolution rate	75.0%	75.0%	63.6%
Complaint resolution within 25 working days rate	90.0%	90.0%	144.1%
Programme 5: Central Hospital Services	0%	0%	0%
Provincial Tertiary Hospitals			
National Core Standards self assessment rate	100.0%	100.0%	50.0%
Quality improvement plan after self assessment rate	100.0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	100.0%	0%
Patient Experience of Care Survey Rate	100.0%	100.0%	0%
Average Length of Stay	7.0 days	7.0 days	7.3 days
Inpatient Bed Utilisation Rate	83.0%	83.0%	79.4%
Expenditure per PDE	R 2,600	R 2,600	R 3,128
Complaints resolution rate	75.0%	75.0%	75.8%
Complaint resolution within 25 working days rate	90.0%	90.0%	132.0%
Central Hospital Services			
National Core Standards self assessment rate			
Quality improvement plan after self assessment rate			
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards			
Patient Experience of Care Survey Rate			
Average Length of Stay			
Inpatient Bed Utilisation Rate			
Expenditure per PDE			
Complaints resolution rate			
Complaint resolution within 25 working days rate			

1. Information submitted by: Dr. A. T. Lekalakala Head of Department: Health North West: Tel: (018) 391 4053

Dr. K. L. Sebege Director General: Office of the Premier North West

*This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter
WESTERN CAPE
Sector: Health
Programme / Subprogramme / Performance Measures
**Target for
2015/16 as per
Annual
Performance
Plan (APP)**
**1st Quarter
Planned output
as per APP**
**1st Quarter
Preliminary
output**
QUARTERLY OUTPUTS
Programme 1: Administration

 Percentage of Hospitals with broadband access
 Percentage of fixed PHC facilities with broadband access

 46.3%
 54.2%

 38.9%
 15.2%

 38.9%
 6.5%

Programme 2: District Health Services
District Management

Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard

 Implementation
 delayed

 Implementation
 delayed

 0%
 0%

Patient Experience of Care rate (PHC Facilities)

39.4%

4.3%

0%

Number of Districts with District Clinical Specialist Teams (DCSTs)

 Not applicable
 in W Cape

 Not applicable
 in W Cape

N/a

PHC utilisation rate

2.3

2.3

2.3

Complaints resolution rate

93.7%

93.8%

93.7%

Complaint resolution within 25 working days rate

93.7%

93.7%

95.8%

HIV and AIDS, TB and STI control

Total clients remaining on ART

188,983

168,769

183,930

Client tested for HIV (incl ANC)

1,103,372

262,768

297,621

TB symptom 5yrs and older screened rate

3.1%

3.1%

8.7%

Male condom distribution Rate (annualised)

58

58

47

Female condom distribution Rate (annualised)

1

1

1

Medical male circumcision performed - Total

22 899

2 061

3 260

TB new client treatment success rate

84.6%

84.6%

84.7%

TB client lost to follow up rate

7.3%

7.3%

9.1%

Maternal, child and women health

Antenatal 1st visit before 20 weeks rate

63.2%

63.2%

64.3%

Mother postnatal visit within 6 days rate

78.7%

78.7%

87.9%

Infant 1st PCR test positive around 6 weeks rate

1.4%

1.4%

1.4%

Immunisation coverage under 1 year (annualised)

93.8%

94.4%

85.3%

Measles 2nd dose coverage (annualised)

77.5%

78.0%

69.1%

DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate

4.3%

4.3%

5.9%

Child under 5 years diarrhoea case fatality rate

0.2%

0.2%

0.1%

Child under 5 years pneumonia case fatality rate

0.5%

0.5%

0.2%

Child under 5 years severe acute malnutrition case fatality rate

4.2%

4.5%

2.2%

School Grade R screening coverage (annualised)

9.5%

9.6%

30.8%

School Grade 1 screening coverage (annualised)

24.2%

24.5%

63.4%

School Grade 8 screening coverage (annualised)

0.1%

0.1%

8.4%

Couple year protection rate (annualised)

74.3%

75.3%

57.7%

Cervical cancer screening coverage (annualised)

59.2%

60.0%

52.6%

Vitamin A 12-59 months coverage (annualised)

44.0%

44.3%

45.6%

District Hospitals

National Core Standards self assessment rate

100.0%

11.8%

0%

Quality improvement plan after self assessment rate

100.0%

100.0%

0%

Percentage of Hospitals compliant with all extreme and vital measures of the national core standards

38.2%

25.0%

0%

Patient Experience of Care Survey Rate

100.0%

11.8%

0%

Average Length of Stay

3.1 days

3.1 days

3.5 days

Inpatient Bed Utilisation Rate

86.9%

87.2%

93.6%

Expenditure per PDE

R 1,945

R 1,883

R 1,590

Complaints resolution rate

94.1%

94.1%

79.7%

Complaint resolution within 25 working days rate

93.5%

93.6%

89.9%

Disease Prevention and Control

Clients screened for hypertension-25 years and older

 Data system to
 be established

 Data system to
 be established

-

Clients screened for diabetes- 5 years and older

 Data system to
 be established

 Data system to
 be established

-

Client screened for Mental disorders

 Data system to
 be established

 Data system to
 be established

0%

Client treated for Mental Disorders new

 Data system to
 be established

 Data system to
 be established

0%

Cataract Surgery Rate annualised

1,725.4

1,667.9

1,515.5

Malaria case fatality rate

2.3%

3.0%

0%

Programme 3: Emergency Medical Services

EMS P1 urban response under 15 minutes rate

75.0%

75.0%

59.6%

EMS P1 rural response under 40 minutes rate

90.0%

90.0%

85.5%

EMS inter-facility transfer rate

23.0%

23.0%

35.0%

Programme 4: Provincial Hospital Services
General (regional) hospitals

National Core Standards self assessment rate

100.0%

-

0%

Quality improvement plan after self assessment rate

100.0%

-

0%

Percentage of Hospitals compliant with all extreme and vital measures of the national core standards

60.0%

-

0%

Patient Experience of Care Survey Rate

100.0%

-

0%

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 1st Quarter
WESTERN CAPE

Sector: Health

Programme / Subprogramme / Performance Measures

**Target for
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output**

QUARTERLY OUTPUTS

Average Length of Stay	3.7 days	3.7 days	4.0 days
Inpatient Bed Utilisation Rate	87.0%	86.8%	89.8%
Expenditure per PDE	R 2,787	R 2,826	R 2,378
Complaints resolution rate	98.4%	98.9%	100.0%
Complaint resolution within 25 working days rate	98.3%	98.9%	94.6%
Programme 5: Central Hospital Services	0%	0%	0%
Provincial Tertiary Hospitals			
National Core Standards self assessment rate	Yes	No	0%
Quality improvement plan after self assessment rate	Yes	No	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	Yes	No	0%
Patient Experience of Care Survey Rate	Yes	No	0%
Average Length of Stay	3.8 days	3.8 days	3.9 days
Inpatient Bed Utilisation Rate	84.0%	87.7%	88.0%
Expenditure per PDE	R 5,217	R 5,046	R 4,049
Complaints resolution rate	92.1%	92.1%	97.7%
Complaint resolution within 25 working days rate	109.4%	108.6%	78.6%
Central Hospital Services			
National Core Standards self assessment rate	100.0%	-	0%
Quality improvement plan after self assessment rate	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	-	0%
Patient Experience of Care Survey Rate	100.0%	-	0%
Average Length of Stay	6.2 days	6.1 days	6.3 days
Inpatient Bed Utilisation Rate	85.9%	85.0%	87.8%
Expenditure per PDE	R 4,532	R 4,564	R 3,885
Complaints resolution rate	98.5%	98.2%	84.8%
Complaint resolution within 25 working days rate	85.0%	84.9%	85.9%

1. Information submitted by: Berth Engelereth Head of Department: Health Western Cape: Tel: (021) 483 3647

Adv. B. Gerber Director General Office of the Premier Western Cape