Sector: Health Programme / Subprogramme / Performance Measures	Target for	1st Quarter	1st Quarter	2nd Quarter	2nd Quarter	3rd Quarter	3rd Quarter
. Og uning / Gusprogrammer / Grownings medicine	2015/16 as per Annual Performance	Planned output as per APP	Actual output - validated	Planned output as per APP	Actual output - validated	Planned output as per APP	Preliminary output
QUARTERLY OUTPUTS	Plan (APP)						
Programme 1: Administration	1						
Percentage of Hospitals with broadband access	50.0%	10.0%	0%	25.0%	0%	35.0%	09
Percentage of fixed PHC facilities with broadband access	49.0%	10.0%	0%	25.0%	15.0%	34.0%	09
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%	5.0%	0%	8.0%	3.79
Patient Experience of Care rate (PHC Facilities) Number of Districts with District Clinical Specialist Teams (DCSTs)	73.0%	73.0%	0% 5	73.0%	0%	73.0%	0
PHC utilisation rate	2.8	0.0	2.7	0.0	2.8	6 2.8	2
Complaints resolution rate	92.0%	92.0%	78.1%	92.0%	78.1%	92.0%	81.09
Complaint resolution within 25 working days rate	80.0%	80.0%	96.9%	80.0%	96.3%	80.0%	97.49
HIV and AIDS, TB and STI control							
Total clients remaining on ART	355,531	320,746	328,595	332,341	342,216	343,936	352,32
Client tested for HIV (incl ANC)	1.300.648	325.162	371.232	325.162	445.939	325.162	484.40
TB symptom 5yrs and older screened rate Male condom distribution Rate (annualised)	70.0%	70.0%	0%	70.0%	0%	70.0%	49.1
Female condom distribution Rate (annualised)	38	38	48	38	58	38	(
Medical male circumcision performed - Total	49 000	133	3 091	32	3 603	21 067	2 2
TB new client treatment success rate	82.0%	82.0%	83.5%	82.0%	83.6%	82.0%	83.9
TB client lost to follow up rate	6.8%	6.8%	6.3%	6.8%	6.3%	6.8%	7.0
Maternal, child and women health							
Antenatal 1st visit before 20 weeks rate	50.0%	50.0%	54.3%	50.0%	59.6%	50.0%	63.9
Mother postnatal visit within 6 days rate	55.0%	55.0%	56.9%	55.0%	56.9%	55.0%	61.1
Infant 1st PCR test positive around 6 weeks rate Immunisation coverage under 1 year (annualised)	1.5%	1.5%	0.7%	1.5%	1.6%	1.5%	1.8
Measles 2nd dose coverage (annualised)	90.0% 90.0%	90.0% 90.0%	82.4% 75.5%	90.0% 90.0%	85.9% 88.6%	90.0% 90.0%	88.2 89.0
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate	0.5%	0.5%	- 9.4%	0.5%	- 25.7%	0.5%	- 630.9
Child under 5 years diarrhoea case fatality rate	5.6%	5.6%	4.9%	5.6%	3.3%	5.6%	2.3
Child under 5 years pneumonia case fatality rate	4.0%	4.0%	2.4%	4.0%	3.7%	4.0%	3.9
Child under 5 years severe acute malnutrition case fatality rate	10.0%	10.0%	13.2%	10.0%	10.8%	10.0%	9.0
School Grade R screening coverage (annualised)	10.0%	2.0%	0%	3.0%	0.8%	6.0%	2.8
School Grade 1 screening coverage (annualised)	27.4%	16.0%	7.0%	22.0%	9.9%	18.0%	18.59
School Grade 8 screening coverage (annualised) Couple year protection rate (annualised)	10.0%	2.0%	3.6%	4.0%	5.6%	8.0%	7.19
Couple year protection rate (annualised) Cervical cancer screening coverage (annualised)	63.0% 44.0%	44.0%	64.9%	44.0%	0% 65.0%	44.0%	0° 68.5°
Vitamin A 12-59 months coverage (annualised)	55.0%	55.0%	57.2%	55.0%	73.5%	55.0%	67.3
District Hospitals	00.070	00.070	07.270	00.070	70.070	00.070	07.0
National Core Standards self assessment rate	75.0%	75.0%	0%	75.0%	4.5%	75.0%	83.3
Quality improvement plan after self assessment rate	100.0%	100.0%	0%	100.0%	0%	100.0%	90.9
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	35.0%	10.0%	0%	15.0%	0%	25.0%	0
Patient Experience of Care Survey Rate	100.0%	100.0%	0%	100.0%	0%	100.0%	68.2
Average Length of Stay Inpatient Bed Utilisation Rate	4.9 days	4.9 days	5.2 days	4.9 days	5.2 days	4.9 days	5.2 da
Expenditure per PDE	65.0% R 2.166	65.0% R 2.166	57.8% R 1.910	65.0% R 2.166	58.9% R 2.030	65.0% R 2.166	57.7° R 2.78
Complaints resolution rate	95.0%	95.0%	94.7%	95.0%	94.7%	95.0%	92.0
Complaint resolution within 25 working days rate	90.0%	90.0%	99.5%	90.0%	99.4%	90.0%	100.0
Disease Prevention and Control							
Clients screened for hypertension-25 years and older	80,000	10,000	507,260	35,000	758,181	55,000	759,34
Clients screened for diabetes- 5 years and older	80.000	10.000	353.706	35.000	589.330	55.000	614.86
Client screened for Mental disorders Client treated for Mental Disorders new	1.1%	1.1%	0.9%	1.1%	2.1%	1.1%	2.5
Client treated for Mental Disorders new Cataract Surgery Rate annualised	10.0% not measured	2.5%	15.4%	5.0%	10.0%	7.5%	8.8
Malaria case fatality rate	not measured		0%		0%		0
Programme 3: Emergency Medical Services		1	0,0	_	078		0
EMS P1 urban response under 15 minutes rate	6.600.0%	66.0%	61.9%	66.0%	59.8%	6.600.0%	57.99
EMS P1 rural response under 40 minutes rate	66.0%	66.0%	42.4%	66.0%	50.0%	66.0%	47.8
EMS inter-facility transfer rate	30.0%	30.0%	27.5%	30.0%	29.3%	30.0%	30.3
Programme 4: Provincial Hospital Services							
General (regional) hospitals							
National Core Standards self assessment rate	75.0%	75.0%	0%	75.0%	0%	75.0%	60.0
Quality improvement plan after self assessment rate Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0% 35.0%	100.0% 35.0%	0% 0%	100.0% 35.0%	0%	100.0% 35.0%	100.0
Patient Experience of Care Survey Rate	70.0%	33.0%	0%	33.0%	40.0%	35.0%	0

QUARTERLY PERFORMANCE REPORTS: 2015/16 - 3rd Quarter EASTERN CAPE Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2015/16 as per Annual	1st Quarter Planned output	1st Quarter Actual output -	2nd Quarter Planned output	2nd Quarter Actual output - validated	3rd Quarter Planned output	3rd Quarter Preliminary
	Performance Plan (APP)	as per APP	validated	as per APP	validated	as per APP	output
QUARTERLY OUTPUTS			•		•	,	
Average Length of Stay	4.6 days	4.6 days	5.5 days	4.6 days	5.7 days	4.6 days	5.4 da
Inpatient Bed Utilisation Rate	75.0%	75.0%	68.5%	75.0%	70.1%	75.0%	66.4
Expenditure per PDE	R 2,181	R 2,181	R 1,320	R 2,181	R 1,556	R 2,181	R 2,24
Complaints resolution rate	90.0%	90.0%	89.1%	90.0%	83.8%	90.0%	86.8
Complaint resolution within 25 working days rate	80.0%	80.0%	99.5%	80.0%	99.0%	80.0%	96.7
Programme 5: Central Hospital Services Provincial Tertiary Hospitals	0%	0%	0%	0%	0%	0%	C
National Core Standards self assessment rate	100.0%	100.0%	0%	100.0%	50.0%	100.0%	50.0
Quality improvement plan after self assessment rate	100.0%	100.0%	0%	100.0%	100.0%	100.0%	100.0
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	100.0%	0%	100.0%	0%	100.0%	100.0
Patient Experience of Care Survey Rate	80.0%	50.0%	0%	62.0%	50.0%	70.0%	50.0
Average Length of Stay	5.5 days	5.5 days	6.0 days	5.5 days	5.9 days	5.5 days	5.7 d
Inpatient Bed Utilisation Rate	75.0%	75.0%	75.6%	75.0%	77.4%	75.0%	77.9
Expenditure per PDE	R 2,019	R 2,019	R 3,377	R 2,019	R 2,607	R 2,019	R 4,3
Complaints resolution rate	80.0%	80.0%	96.5%	80.0%	98.3%	80.0%	97.
Complaint resolution within 25 working days rate	90.0%	90.0%	100.0%	90.0%	100.0%	90.0%	100.0
Central Hospital Services							
National Core Standards self assessment rate	100.0%	100.0%	0%	100.0%	0%	100.0%	
Quality improvement plan after self assessment rate	100.0%	100.0%	0%	100.0%	0%	100.0%	
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	100.0%	0%	100.0%	0%	100.0%	
Patient Experience of Care Survey Rate	80.0%	60.0%	0%	70.0%	0%	75.0%	
Average Length of Stay	5.5 days	5.5 days	7.8 days	5.5 days	8.2 days	5.5 days	8.3 d
Inpatient Bed Utilisation Rate	75.0%	75.0%	92.7%	75.0%	98.8%	75.0%	92.5
Expenditure per PDE	R 2,019	R 2,019	R 4,402	R 2,019	R 4,119	R 2,019	R 6,3
Complaints resolution rate	80.0%	80.0%	100.0%	80.0%	96.8%	80.0%	98.
Complaint resolution within 25 working days rate	90.0%	90.0%	100.0%	90.0%	100.0%	90.0%	100.0

Sector: Health Programme / Subprogramme / Performance Measures	Target for	1st Quarter	1st Quarter	2nd Quarter	2nd Quarter	3rd Quarter	3rd Quarter
	2015/16 as per Annual	Planned output as per APP	Actual output - validated	Planned output as per APP	Actual output - validated	Planned output as per APP	Preliminary output
	Performance Plan (APP)	as per AFF	validated	as per AFF	validated	as per AFF	output
QUARTERLY OUTPUTS	11011(7411)				I		
Programme 1: Administration							
Percentage of Hospitals with broadband access	25.0%	0%	0%	0%	0%	0%	09
Percentage of fixed PHC facilities with broadband access	75.0%	0%	0%	0%	0%	0%	09
Programme 2: District Health Services District Management							
Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard	10.0%	2.0%	8.2%	3.0%	1.0%	3.0%	4.0%
Patient Experience of Care rate (PHC Facilities)	85.0%	85.0%	0%	85.0%	0%	85.0%	30.9%
Number of Districts with District Clinical Specialist Teams (DCSTs)	5	5	5	-	-	-	-
PHC utilisation rate	3.0	3.0	2.4	3.0	2.5	3.0	2.4
Complaints resolution rate Complaint resolution within 25 working days rate	85.0% 85.0%	85.0% 85.0%	95.3% 88.4%	85.0% 85.0%	80.1% 97.7%	85.0% 85.0%	59.7% 97.6%
HIV and AIDS. TB and STI control	85.0%	85.0%	88.4%	85.0%	97.7%	85.0%	97.67
Total clients remaining on ART	191,180	172,632	174,191	178,814	184,340	184,996	182,53
Client tested for HIV (incl ANC)	606,343	151,585	138,183	151,585	180,862	151,588	185,34
TB symptom 5yrs and older screened rate	65.0%	65.0%	92.6%	65.0%	86.5%	65.0%	105.69
Male condom distribution Rate (annualised)	46	46	33	46	69	46	5
Female condom distribution Rate (annualised) Medical male circumcision performed - Total	74 496	11 640	10 384	1 34 920	11 243	6 984	6 65
TB new client treatment success rate	84.0%	84.0%	80.5%	84.0%	79.8%	84.0%	77.19
TB client lost to follow up rate	4.5%	4.5%	5.3%	4.5%	5.4%	4.5%	5.49
Maternal, child and women health							
Antenatal 1st visit before 20 weeks rate	65.0%	65.0%	62.2%	65.0%	60.4%	65.0%	66.09
Mother postnatal visit within 6 days rate	82.0%	82.0%	74.2%	82.0%	72.3%	82.0%	75.29
Infant 1st PCR test positive around 6 weeks rate	<2%	<2%	1.4% 84.2%	<2%	1.3% 83.7%	<2%	1.89 85.29
Immunisation coverage under 1 year (annualised) Measles 2nd dose coverage (annualised)	95.0% 85.0%	95.0% 85.0%	84.2% 86.5%	95.0% 85.0%	83.7% 84.8%	95.0% 85.0%	85.27
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate	<10%	<10%	109.5%	<10%	103.2%	<10%	102.09
Child under 5 years diarrhoea case fatality rate	<3%	<3%	3.3%	<3%	1.8%	<3%	2.79
Child under 5 years pneumonia case fatality rate	<3%	<3%	1.5%	<3%	2.3%	<3%	1.79
Child under 5 years severe acute malnutrition case fatality rate	11.4%	11.4%	10.3%	11.4%	10.1%	11.4%	4.19
School Grade R screening coverage (annualised)	30.0%	30.0%	32.6%	30.0%	16.2%	30.0%	42.39
School Grade 1 screening coverage (annualised) School Grade 8 screening coverage (annualised)	40.0% 35.0%	40.0% 35.0%	35.4% 48.0%	40.0% 35.0%	25.1% 23.2%	40.0% 35.0%	46.79 31.99
Couple year protection rate (annualised)	55.0%	55.0%	44.9%	55.0%	68.5%	55.0%	61.2%
Cervical cancer screening coverage (annualised)	60.0%	60.0%	49.0%	60.0%	72.6%	60.0%	62.89
Vitamin A 12-59 months coverage (annualised)	60.0%	60.0%	60.9%	60.0%	61.0%	60.0%	55.19
District Hospitals							
National Core Standards self assessment rate	50.0%	10.0%	12.5%	20.0%	16.7%	15.0%	4.29
Quality improvement plan after self assessment rate Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	50.0% 50.0%	10.0%	100.0%	20.0%	100.0%	15.0% 0%	100.09
Patient Experience of Care Survey Rate	85.0%	85.0%	45.8%	85.0%	58.3%	85.0%	41.79
Average Length of Stay	3.5 days	3.5 days	3.3 days	3.5 days	3.0 days	3.5 days	3.1 day
Inpatient Bed Utilisation Rate	70.0%	70.0%	60.1%	70.0%	56.4%	70.0%	57.69
Expenditure per PDE	R 2,000	R 2,000	R 2,038	R 2,000	R 2,464	R 2,000	R 2,30
Complaints resolution rate	85.0%	85.0%	86.0%	85.0%	85.6%	85.0%	62.09
Complaint resolution within 25 working days rate Disease Prevention and Control	85.0%	85.0%	89.2%	85.0%	94.1%	85.0%	100.09
Clients screened for hypertension-25 years and older	630.673	157.688	121.428	157.688	184.125	157.688	235.44
Clients screened for diabetes- 5 years and older	630,673	157,688	74,105	157,688	120,780	157,688	142,50
Client screened for Mental disorders	20.0%	20.0%	4.3%	20.0%	9.2%	20.0%	13.19
Client treated for Mental Disorders new	90.0%	90.0%	1.4%	90.0%	1.2%	90.0%	1.79
Cataract Surgery Rate annualised	1,535.0	1,535.0	553.7	1,535.0	909.9	1,535.0	923.
Malaria case fatality rate	0%	0%	0%	0%	0%	0%	09
FOOTAMME 3: Emergency Medical Services EMS P1 urban response under 15 minutes rate	50.0%	50.0%	30.5%	50.0%	29.7%	50.0%	25.69
EMS P1 rural response under 40 minutes rate	68.0%	68.0%	67.0%	68.0%	67.3%	68.0%	73.39
EMS inter-facility transfer rate	12.0%	12.0%	9.4%	12.0%	9.2%	12.0%	8.79
Programme 4: Provincial Hospital Services							
General (regional) hospitals							
National Core Standards self assessment rate	100.0%	25.0%	50.0%	25.0%	25.0%	25.0%	09
Quality improvement plan after self assessment rate Percentage of Hespitals compliant with all extreme and vital measures of the national core standards	100.0% 50.0%	25.0% 0%	100.0%	25.0% 0%	100.0% 0%	25.0%	09
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards Patient Experience of Care Survey Rate	85.0%	85.0%	100.0%	85.0%	100.0%	85.0%	100.09

rogramme / Subprogramme / Performance Measures	Target for 2015/16 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Preliminary output
QUARTERLY OUTPUTS			1				
Average Length of Stay	5.0 days	5.0 days	5.2 days	5.0 days	5.4 days	5.0 days	5.4 day
Inpatient Bed Utilisation Rate	75.0%	75.0%	65.2%	75.0%	66.6%	75.0%	69.9%
Expenditure per PDE	R 2,480	R 2,480	R 2,340	R 2,480	R 2,560	R 2,480	R 2,36
Complaints resolution rate	85.0%	85.0%	82.3%	85.0%	69.7%	85.0%	94.6
Complaint resolution within 25 working days rate	85.0%	85.0%	77.8%	85.0%	104.6%	85.0%	100.0
Programme 5: Central Hospital Services	0%	0%	0%	0%	0%	0%	0'
Provincial Tertiary Hospitals					-		
National Core Standards self assessment rate	100.0%	0%	100.0%	0%	0%	100.0%	0'
Quality improvement plan after self assessment rate	100.0%	0%	100.0%	0%	0%	100.0%	0'
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	0%	0%	0%	0%	0%	0%	0
Patient Experience of Care Survey Rate	85.0%	85.0%	100.0%	85.0%	100.0%	85.0%	100.09
Average Length of Stay	8.5 days	8.5 days	6.7 days	8.5 days	6.3 days	8.5 days	6.2 da
Inpatient Bed Utilisation Rate	80.0%	80.0%	77.1%	80.0%	82.9%	80.0%	90.8
Expenditure per PDE	R 2,800	R 2,800	R 2,755	R 2,800	R 3,091	R 2,800	R 3,02
Complaints resolution rate	85.0%	85.0%	82.6%	85.0%	33.3%	85.0%	71.4
Complaint resolution within 25 working days rate	85.0%	85.0%	42.1%	85.0%	100.0%	85.0%	100.0
Central Hospital Services						ı	
National Core Standards self assessment rate	100.0%	0%	100.0%	0%	0%	100.0%	0'
Quality improvement plan after self assessment rate	100.0%	0%	100.0%	0%	0%	100.0%	0'
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	0%	0%	0%	0%	0%	0'
Patient Experience of Care Survey Rate	85.0%	85.0%	100.0%	85.0%	0%	85.0%	100.0
Average Length of Stay	7.5 davs	7.5 davs	7.3 davs	7.5 davs	6.7 davs	7.5 davs	7.8 da
Inpatient Bed Utilisation Rate	77.0%	77.0%	74.3%	77.0%	72.7%	77.0%	72.3
Expenditure per PDE	R 4,652	R 4,652	R 5,180	R 4,652	R 5,988	R 4,652	R 6,03
Complaints resolution rate Complaint resolution within 25 working days rate	85.0% 85.0%	85.0% 85.0%	100.0% 95.3%	85.0% 85.0%	100.0% 97.9%	85.0% 85.0%	100.0°

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

Mr. K. Ralekontsane Director General: Office of the Premier Free Sta.

ector: Health rogramme / Subprogramme / Performance Measures	Target for	1st Quarter	1st Quarter	2nd Quarter	2nd Quarter	3rd Quarter	3rd Quarter
rogramme / Subprogramme / Performance Measures	2015/16 as per Annual Performance Plan (APP)	Planned output as per APP	Actual output - validated	Planned output as per APP	Actual output - validated	Planned output as per APP	Preliminary output
UARTERLY OUTPUTS							
rogramme 1: Administration							
Percentage of Hospitals with broadband access	50.0%	28.0%	0%	38.0%	50.0%	11.0%	88.2%
Percentage of fixed PHC facilities with broadband access	1.0%	0%	0%	0%	10.8%	0%	09
rogramme 2: District Health Services							
District Management Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard	1.3%	0.3%	2.8%	0.3%	7.9%	0.3%	4.5%
Patient Experience of Care rate (PHC Facilities)	100.0%	0.3%	0%	35.0%	0%	65.0%	4.57
Number of Districts with District Clinical Specialist Teams (DCSTs)	5	5	5	5	5	5	
PHC utilisation rate	2.5		1.7		1.7		1.
Complaints resolution rate	90.0%	0%	85.7%	0%	86.8%	0%	80.69
Complaint resolution within 25 working days rate	80.0%	0%	98.1%	0%	78.1%	0%	87.99
HIV and AIDS, TB and STI control	746,678	074 100	701.219	698.338	723.773	722.508	727.19
Total clients remaining on ART Client tested for HIV (incl ANC)	746,678 2,119,906	674,169 529,976	701,219 541,376	698,338 529,978	723,773 625,347	722,508 529,976	727,19 792,90
TB symptom 5yrs and older screened rate	2,119,906	529,976 24.0%	541,376 52.5%	529,978 26.0%	625,347 35.6%	529,976 28.0%	792,90 40,29
Male condom distribution Rate (annualised)	919,782,721	47,945,680	32.5% 44	47,945,680	35.6%	47,945,680	40.2
Female condom distribution Rate (annualised)	4,097,926	1,024,481	1	1,024,481	2	1,024,481	
Medical male circumcision performed - Total	151 082	37 770		37 771	-	37 771	
TB new client treatment success rate	86.0%	86.0%	86.1%	86.0%	86.9%	86.0%	86.99
TB client lost to follow up rate	<5%	<5%	5.2%	<5%	5.0%	<5%	4.89
Maternal, child and women health	FF 00/	FF 00/	E0.00/	55.00/	E4.00/	FF 00/	50.40
Antenatal 1st visit before 20 weeks rate Mother postnatal visit within 6 days rate	55.0% 87.0%	55.0% 87.0%	50.3% 79.0%	55.0% 87.0%	54.6% 83.3%	55.0% 87.0%	56.19 86.69
Infant 1st PCR test positive around 6 weeks rate	87.0% <2%	87.0% <2%	1.4%	87.0% <2%	1.3%	87.0% <2%	1.79
Immunisation coverage under 1 year (annualised)	90.0%	90.0%	108.7%	90.0%	104.5%	90.0%	108.09
Measles 2nd dose coverage (annualised)	90.0%	90.0%	86.3%	90.0%	94.0%	90.0%	98.79
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate	<10%	<10%	- 3.4%	<10%	93.5%	<10%	- 783.29
Child under 5 years diarrhoea case fatality rate	3.0%	3.0%	2.0%	3.0%	1.7%	3.0%	2.29
Child under 5 years pneumonia case fatality rate	2.5%	2.5%	1.7%	2.5%	1.8%	2.5%	2.19
Child under 5 years severe acute malnutrition case fatality rate School Grade R screening coverage (annualised)	7.0% 10.0%	7.0% 10.0%	10.2% 3.8%	7.0% 10.0%	6.4% 6.6%	7.0% 10.0%	6.69 15.29
School Grade 1 screening coverage (annualised) School Grade 1 screening coverage (annualised)	40.0%	40.0%	27.3%	40.0%	14.6%	40.0%	31.39
School Grade 8 screening coverage (annualised)	20.0%	20.0%	10.0%	20.0%	9.7%	20.0%	7.49
Couple year protection rate (annualised)	50.0%	50.0%	46.8%	50.0%	45.5%	50.0%	40.79
Cervical cancer screening coverage (annualised)	55.0%	55.0%	42.2%	55.0%	46.7%	55.0%	54.49
Vitamin A 12-59 months coverage (annualised)	0%	60.0%	42.7%	60.0%	46.9%	60.0%	50.09
District Hospitals							
National Core Standards self assessment rate Quality improvement plan after self assessment rate	100.0% 80.0%	100.0% 80.0%	36.4% 25.0%	100.0% 80.0%	27.3%	100.0% 80.0%	72.79
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	27.0%	27.0%	25.0%	27.0%	100.0% 0%	27.0%	100.09
Patient Experience of Care Survey Rate	100.0%	0%	0%	45.0%	0%	75.0%	09
Average Length of Stay	4.0 days	4.0 days	3.4 days	4.0 days	3.2 days	4.0 days	3.2 day
Inpatient Bed Utilisation Rate	80.0%	80.0%	65.8%	80.0%	66.2%	80.0%	70.19
Expenditure per PDE	R 2,500	R 2,500	R 2,366	R 2,500	R 2,406	R 2,500	R 2,59
Complaints resolution rate	80.0%	80.0%	92.4%	80.0%	91.7%	80.0%	88.19
Complaint resolution within 25 working days rate Disease Prevention and Control	68.0%	68.0%	99.2%	68.0%	100.0%	68.0%	100.09
Clients screened for hypertension-25 years and older	58,800	14,000	7,613	14,000	683,943	14,000	1,198,94
Clients screened for diabetes- 5 years and older	58,800	14,000	7,613	14,000	335,245	14,000	623.10
Client screened for Mental disorders	2.0%	2.0%	0%	2.0%	1.8%	2.0%	3.69
Client treated for Mental Disorders new	3.0%	3.0%	0%	3.0%	2.1%	3.0%	1.59
Cataract Surgery Rate annualised	1300mil	1300mil	-	1300mil	-	1300mil	-
Malaria case fatality rate	<0.3%	<0.3%	0%	<0.3%	1.4%	<0.3%	1.89
rogramme 3: Emergency Medical Services	05	05	ma		ma		
EMS P1 urban response under 15 minutes rate	85.0%	85.0%	79.6%	85.0%	76.7%	85.0%	75.19
EMS P1 rural response under 40 minutes rate EMS inter-facility transfer rate	100.0% 12.0%	100.0% 10.5%	69.8% 26.0%	100.0% 11.0%	100.0% 27.7%	100.0% 11.5%	95.79 29.39
rogramme 4: Provincial Hospital Services	12.0%	10.5%	20.0%	11.0%	21.1%	11.5%	29.39
General (regional) hospitals							
National Core Standards self assessment rate	100.0%	100.0%	33.3%	100.0%	22.2%	100.0%	100.09
Overlite incompany of the office of the control of	0%	05.00/	33.3%	50.0%	100.0%	55.0%	100.09
Quality improvement plan after self assessment rate Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	33.0%	35.0% 22.0%	33.3%	22.0%	100.0%	22.0%	100.0%

Programme / Subprogramme / Performance Measures	Target for 2015/16 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Preliminary output
QUARTERLY OUTPUTS		1	1	ı	1		
Average Length of Stay	4.8 days	4.8 days	3.6 days	4.8 days	3.7 days	4.8 days	3.5 day
Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate	80.0% R 2,250 86.0% 80.0%	80.0% R 2,250 86.0% 80.0%	86.1% R 2,476 89.0% 100.5%	80.0% R 2,250 86.0% 80.0%	86.1% R 2,566 92.1% 100.0%	80.0% R 2,250 86.0% 80.0%	85.9% R 2,416 93.6% 100.0%
Programme 5: Central Hospital Services	80.0%	80.0%	100.5%	80.0%	100.0%	80.0%	100.09
Provincial Tertiary Hospitals							
National Core Standards self assessment rate	100.0%	33.0%	33.3%	66.0%	33.3%	100.0%	66.79
Quality improvement plan after self assessment rate	100.0%	33.0%	0%	66.0%	100.0%	100.0%	100.09
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	33.0%	0%	0%	0%	0%	33.0%	09
Patient Experience of Care Survey Rate	100.0%	0%	0%	33.0%	0%	66.0%	09
Average Length of Stay	5.4 days	5.4 days	5.0 days	5.4 days	5.0 days	5.4 days	5.1 da
Inpatient Bed Utilisation Rate	82.0%	80.0%	84.3%	80.0%	86.2%	82.0%	87.4
Expenditure per PDE	R 2,625	R 2,625	R 2,729	R 2,625	R 2,476	R 2,625	R 2,67
Complaints resolution rate	85.6%	85.6%	92.1%	85.6%	86.7%	85.6%	88.29
Complaint resolution within 25 working days rate	68.0%	68.0%	100.0%	68.0%	100.0%	68.0%	100.09
Central Hospital Services							
National Core Standards self assessment rate	100.0%	100.0%	50.0%	100.0%	25.0%	100.0%	75.09
Quality improvement plan after self assessment rate	100.0%	100.0%	0%	100.0%	100.0%	100.0%	66.79
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	75.0%	0%	0%	0%	0%	0%	09
Patient Experience of Care Survey Rate	100.0%	0%	0%	0%	0%	25.0%	09
Average Length of Stay Inpatient Bed Utilisation Rate	6.0 davs	6.0 davs	5.5 davs	6.0 davs	5.3 davs	6.0 davs	5.6 da 80.79
Expenditure per PDE	80.0% R 2.250	80.0% R 2.250	79.3% R 3.737	80.0% R 2.250	79.6% R 2.607	80.0% R 2.250	80.7 R 2.88
Complaints resolution rate	80.0%	80.0%	80.3%	80.0%	88.6%	80.0%	87.9°
Complaint resolution within 25 working days rate	90.0%	90.0%	77.9%	90.0%	100.0%	90.0%	100.0

Programme / Subprogramme / Performance Measures	Target for 2015/16 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarte Preliminar output
QUARTERLY OUTPUTS							
Programme 1: Administration							
Percentage of Hospitals with broadband access	90.0%	50.0%	47.4%	65.0%	48.7%	80.0%	51.
Percentage of fixed PHC facilities with broadband access	45.0%	32.0%	24.0%	35.0%	24.0%	40.0%	22.
Programme 2: District Health Services							
District Management	00.00/	0.00/	001	40.00/	40.40/	45.007	40
Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard Patient Experience of Care rate (PHC Facilities)	20.0%	8.0%	0%	12.0%	10.1%	15.0%	16.
Number of Districts with District Clinical Specialist Teams (DCSTs)	100.0%	25.0%	31.7%	50.0%	30.8%	75.0%	22.
PHC utilisation rate	3.0	3.0	3.0	3.0	2.9	3.0	
Complaints resolution rate	80.0%	77.0%	79.0%	78.0%	84.4%	79.0%	73.
Complaint resolution within 25 working days rate	90.0%	90.0%	95.4%	90.0%	95.1%	90.0%	88.
HIV and AIDS. TB and STI control	30.070	30.070	33.476	30.070	33.170	30.070	00.
Total clients remaining on ART	1,276,200	1,097,968	991,700	1,157,380	1,028,595	1,216,792	1,029,
Client tested for HIV (incl ANC)	2,067,065	516,766	593,193	1,033,532	634,843	1,550,299	638.
TB symptom 5yrs and older screened rate	20.0%	5.0%	0%	10.0%	0%	15.0%	
Male condom distribution Rate (annualised)	63	16	47	32	50	48	
Female condom distribution Rate (annualised)	1	1	1	1	2	1	
Medical male circumcision performed - Total	631 374	460 000	40 305	520 000	38 998	570 000	25
TB new client treatment success rate	85.0%	85.0%		85.0%	76.2%	85.0%	83
TB client lost to follow up rate	3.9%	3.9%	4.2%	3.9%	3.4%	3.9%	4.
Maternal, child and women health	00.00/	ET 00/	60.1%	E0 00/	00.00/	E0 00/	
Antenatal 1st visit before 20 weeks rate Mother postnatal visit within 6 days rate	60.0% 74.4%	57.0% 72.0%	69.9%	58.0% 73.0%	66.3% 70.5%	59.0% 74.0%	67. 72
Infant 1st PCR test positive around 6 weeks rate	74.4%	1.4%	1.0%	1.2%	1.2%	1.0%	1.
Immunisation coverage under 1 year (annualised)	90.0%	89.0%	92.4%	90.0%	88.1%	90.0%	87
Measles 2nd dose coverage (annualised)	85.0%	79.0%	85.7%	81.0%	86.1%	83.0%	82
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate	7.0%	8.0%	3.7%	7.8%	13.5%	7.4%	- 10
Child under 5 years diarrhoea case fatality rate	3.2%	3.3%	3.0%	3.2%	2.0%	3.2%	2
Child under 5 years pneumonia case fatality rate	2.4%	3.0%	3.2%	2.8%	3.2%	2.6%	2
Child under 5 years severe acute malnutrition case fatality rate	8.0%	8.0%	9.3%	8.0%	7.7%	8.0%	6
School Grade R screening coverage (annualised)	40.0%	35.0%	57.2%	37.0%	4.9%	38.0%	9
School Grade 1 screening coverage (annualised)	55.0%	42.0%	0%	47.0%	19.1%	50.0%	22
School Grade 8 screening coverage (annualised)	40.0%	35.0%	18.6%	37.0%	8.3%	38.0%	8
Couple year protection rate (annualised)	55.0%	46.0%	47.5%	48.0%	50.0%	49.0%	47
Cervical cancer screening coverage (annualised)	75.0%	75.0%	63.9%	75.0%	81.9%	75.0%	83
Vitamin A 12-59 months coverage (annualised) District Hospitals	60.0%	50.0%	70.8%	54.0%	68.6%	56.0%	55
National Core Standards self assessment rate	100.0%	25.0%	36.8%	50.0%	7.9%	75.0%	
Quality improvement plan after self assessment rate	100.0%	25.0%	85.7%	50.0%	0%	75.0%	
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	14.0%	0%	0%	3.0%	0%	10.0%	
Patient Experience of Care Survey Rate	100.0%	25.0%	65.8%	50.0%	50.0%	75.0%	71
Average Length of Stay	5.8 days	5.8 days	5.8 days	5.8 days	5.7 days	5.8 days	5.9
Inpatient Bed Utilisation Rate	64.7%	64.0%	62.3%	64.3%	61.3%	64.5%	60
Expenditure per PDE	R 1,808	R 1,930	R 2,019	R 1,900	R 1,979	R 1,850	R 2,
Complaints resolution rate	75.0%	75.0%	80.4%	75.0%	71.4%	75.0%	83
Complaint resolution within 25 working days rate	85.0%	85.0%	86.0%	85.0%	95.5%	85.0%	90
Disease Prevention and Control					4 000 - : -		4.6
Clients screened for hypertension-25 years and older Clients screened for diabetes- 5 years and older	establish b/l establish b/l	establish b/l establish b/l	1,417,215	establish b/l establish b/l	1,823,742 1,225,814	establish b/l establish b/l	1,951, 1,501.
Clients screened for diabetes- 5 years and older Client screened for Mental disorders	establish b/l	establish b/l	859,545 1.3%	establish b/l	1,225,814	establish b/l	
Client screened for Mental disorders Client treated for Mental Disorders new	establish b/l	establish b/l	1.3%	establish b/l	3.1%	establish b/l	3. 1.
Cataract Surgery Rate annualised	930.0	233.0	635.0	466.0	600.0	699.0	66
Malaria case fatality rate	<0.5	<0.5	0.8%	<0.5	0%	<0.5	1
Programme 3: Emergency Medical Services	40.5	10.5	0.070	40.5	1	-0.5	
EMS P1 urban response under 15 minutes rate	6.5%	6.0%	4.8%	6.2%	5.1%	6.4%	5
EMS P1 rural response under 40 minutes rate	33.0%	31.0%	33.3%	31.6%	32.4%	32.4%	32
EMS inter-facility transfer rate	37.0%	32.0%	40.6%	34.0%	41.6%	36.0%	41
Programme 4: Provincial Hospital Services							
General (regional) hospitals							
National Core Standards self assessment rate	100.0%	25.0%	61.5%	50.0%	0%	75.0%	
	100.0%	25.0%	0%	50.0%	0%	75.0%	
Quality improvement plan after self assessment rate Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	23.0%	10.0%	37.5%	10.0%	0%	23.0%	

Programme / Subprogramme / Performance Measures	Target for	1st Quarter	1st Quarter	2nd Quarter	2nd Quarter	3rd Quarter	3rd Quarter
	2015/16 as per Annual Performance Plan (APP)	Planned output as per APP	Actual output - validated	Planned output as per APP	Actual output - validated	Planned output as per APP	Preliminary output
QUARTERLY OUTPUTS	(/						
Average Length of Stay	6.1 days	6.1 days	6.4 days	6.1 days	6.4 days	6.1 days	6.4 day
Inpatient Bed Utilisation Rate	76.1%	76.7%	78.0%	76.5%	76.1%	76.3%	74.4%
Expenditure per PDE	R 2.225	R 2.300	R 2.733	R 2.280	R 2.623	R 2.260	R 3.06
Complaints resolution rate	80.0%	80.0%	78.1%	80.0%	86.3%	80.0%	86.69
Complaint resolution within 25 working days rate	95.0%	94.0%	98.0%	94.0%	96.0%	94.5%	100.09
Programme 5: Central Hospital Services	0%	0%	0%	0%	0%	0%	09
Provincial Tertiary Hospitals							
National Core Standards self assessment rate	100.0%	50.0%	33.3%	50.0%	0%	50.0%	09
Quality improvement plan after self assessment rate	100.0%	50.0%	0%	50.0%	0%	50.0%	0'
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	50.0%	0%	100.0%	0%	0%	0%	0'
Patient Experience of Care Survey Rate	100.0%	50.0%	66.7%	50.0%	66.7%	50.0%	66.79
Average Length of Stay	9.6 days	9.9 days	7.7 days	9.8 days	7.8 days	9.7 days	7.4 da
Inpatient Bed Utilisation Rate	84.0%	84.0%	76.4%	84.0%	73.0%	84.0%	63.4
Expenditure per PDE	R 4,377	R 5,000	R 2,685	R 4,800	R 2,876	R 4,500	R 4,69
Complaints resolution rate	78.0%	74.5%	81.1%	75.0%	84.8%	75.0%	78.09
Complaint resolution within 25 working days rate	100.0%	100.0%	100.0%	100.0%	98.1%	100.0%	90.69
Central Hospital Services							
National Core Standards self assessment rate	100.0%	0%	0%	0%	0%	0%	09
Quality improvement plan after self assessment rate	100.0%	100.0%	0%	100.0%	0%	100.0%	09
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	0%	0%	0%	0%	0%	0'
Patient Experience of Care Survey Rate	100.0%	0%	0%	0%	0%	0%	100.09
Average Length of Stay	8.5 davs	8.5 davs	8.7 davs	8.5 davs	8.5 davs	8.5 davs	8.4 da
Inpatient Bed Utilisation Rate	70.0%	69.0%	66.8%	69.3%	67.1%	69.7%	68.7
Expenditure per PDE	R 7,651	R 7,651	R 8,791	R 7,651	R 8,033	R 7,651	R 7,57
Complaints resolution rate	80.0%	75.0%	25.0%	76.0%	96.2%	78.0%	77.8
Complaint resolution within 25 working days rate	100.0%	100.0%	100.0%	100.0%	96.0%	100.0%	100.09

Sector: Health	T	4-4-0	4-4-0	0	0-101	3rd Quarter	2-4 0
rogramme / Subprogramme / Performance Measures	Target for 2015/16 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Preliminary output
QUARTERLY OUTPUTS	1						
Programme 1: Administration							
Percentage of Hospitals with broadband access	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Percentage of fixed PHC facilities with broadband access	30.0%	5.0%	18.2%	5.0%	20.3%	5.0%	26.6%
Programme 2: District Health Services							
District Management	40.00/	0.001	= 00/	4.00/		0.001	
Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard	10.0%	2.0%	5.0%	4.0%	0%	6.0%	1.19
Patient Experience of Care rate (PHC Facilities) Number of Districts with District Clinical Specialist Teams (DCSTs)	70.0%	N/A 5	0%	N/A 5	0%	N/A 5	09
PHC utilisation rate	2.8	2.8	2.5	2.8	2.6	2.8	2.
Complaints resolution rate	100.0%	100.0%	68.0%	100.0%	80.5%	100.0%	76.39
Complaint resolution within 25 working days rate	94.0%	94.0%	96.0%	94.0%	96.5%	94.0%	96.5%
HIV and AIDS, TB and STI control							
Total clients remaining on ART	248,500	221,500	235,000	230,500	246,228	239,500	248,57
Client tested for HIV (incl ANC)	995,342	248,836	172,931	248,836	367,136	248,835	374,20
TB symptom 5yrs and older screened rate	70.0%	70.0%	64.1%	70.0%	70.2%	70.0%	74.89
Male condom distribution Rate (annualised)	36	36	38	36	49	36	5
Female condom distribution Rate (annualised)	1	1	1	1	1	1	
Medical male circumcision performed - Total	62 000	4 000	12 578	52 000	50 721	4 000	9 82
TB new client treatment success rate TB client lost to follow up rate	7,605.0%	76.5%	75.5%	76.5%	81.9%	76.5%	80.09
Maternal, child and women health	<5	<5	4.1%	<5	5.4%	<5	6.19
Antenatal 1st visit before 20 weeks rate	46.0%	46.0%	78.7%	46.0%	62.1%	46.0%	64.59
Mother postnatal visit within 6 days rate	75.0%	75.0%	63.3%	75.0%	68.0%	75.0%	68.69
Infant 1st PCR test positive around 6 weeks rate	<1	<1	2.5%	<1	2.1%	<1	1.89
Immunisation coverage under 1 year (annualised)	90.0%	90.0%	79.2%	90.0%	78.8%	90.0%	79.19
Measles 2nd dose coverage (annualised)	85.0%	85.0%	73.6%	85.0%	85.2%	85.0%	87.49
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate	15.0%	18.0%	276.9%	17.0%	13.9%	16.0%	- 29.49
Child under 5 years diarrhoea case fatality rate	5.0%	5.0%	4.4%	5.0%	2.5%	5.0%	3.19
Child under 5 years pneumonia case fatality rate	4.5%	4.5%	2.8%	4.5%	3.3%	4.5%	3.09
Child under 5 years severe acute malnutrition case fatality rate	15.0%	15.0%	16.5%	15.0%	10.5%	15.0%	11.19
School Grade R screening coverage (annualised)	20.0%	10.0%	0%	15.0%	0.9%	18.0%	31.19
School Grade 1 screening coverage (annualised)	20.0%	10.0%	46.4%	15.0%	30.6%	20.0%	30.49
School Grade 8 screening coverage (annualised) Couple year protection rate (annualised)	20.0%	10.0%	16.3%	15.0%	16.6%	20.0%	10.89
Cervical cancer screening coverage (annualised)	46.0% 57.0%	46.0% 57.0%	21.4% 44.8%	46.0% 57.0%	49.8% 55.5%	46.0% 57.0%	52.09 55.19
Vitamin A 12-59 months coverage (annualised)	38.0%	38.0%	48.1%	38.0%	53.9%	38.0%	47.09
District Hospitals	30.070	30.070	40.170	30.070	33.376	30.070	47.0
National Core Standards self assessment rate	100.0%	23.0%	23.3%	50.0%	70.0%	77.0%	73.39
Quality improvement plan after self assessment rate	100.0%	23.0%	71.4%	50.0%	0%	77.0%	90.99
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	66.7%	16.7%	0%	33.0%	0%	50.0%	09
Patient Experience of Care Survey Rate	100.0%	N/A	0%	N/A	0%	N/A	09
Average Length of Stay	4.3 days	4.3 days	4.1 days	4.3 days	4.1 days	4.3 days	4.2 da
Inpatient Bed Utilisation Rate	72.0%	72.0%	23.4%	72.0%	23.4%	72.0%	36.09
Expenditure per PDE	R 2,200	R 2,200	R 2,231	R 2,200	R 2,300	R 2,200	R 1,42
Complaints resolution rate	100.0%	100.0%	89.6%	100.0%	92.2%	100.0%	92.79
Complaint resolution within 25 working days rate Disease Prevention and Control	100.0%	100.0%	91.7%	100.0%	97.3%	100.0%	97.69
Clients screened for hypertension-25 years and older	250,000	62,500		62,500	619,868	62,500	564,59
Clients screened for diabetes- 5 years and older	200,000	50.000		50.000	245,081	50.000	298.34
Client screened for Mental disorders	28.0%	28.0%	1.5%	28.0%	4.4%	28.0%	5.59
Client treated for Mental Disorders new	28.0%	28.0%	3.6%	28.0%	1.9%	28.0%	1.79
Cataract Surgery Rate annualised	1,500.0	375.0	-	375.0	-	375.0	-
Malaria case fatality rate	1.2%	1.2%	0.7%	1.2%	0.5%	1.2%	1.99
rogramme 3: Emergency Medical Services	1						
EMS P1 urban response under 15 minutes rate	59.5%	50.0%	87.7%	53.0%	73.7%	56.0%	61.79
EMS P1 rural response under 40 minutes rate	61.5%	53.0%	72.1%	55.0%	6.7%	57.0%	71.49
EMS inter-facility transfer rate	7.9%	7.9%	22.9%	7.9%	19.7%	7.9%	18.09
rogramme 4: Provincial Hospital Services	1						
General (regional) hospitals	400	40	40		40		
National Core Standards self assessment rate	100.0%	40.0%	40.0%	60.0%	40.0%	80.0%	60.09
Quality improvement plan after self assessment rate	100.0%	40.0%	50.0%	60.0%	100.0%	80.0%	09
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	40.0%	40.0%	0%	40.0%	0%	40.0%	09

UARTERLY OUTPUTS Average Length of Stay Inpatient Bed Utilisation Rate Expenditure par PDE Complaints resolution rate Complaint resolution rate Complaint resolution within 25 working days rate rogramme 5: Central Hospital Services Provincial Territary 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 Expenditure par Hospitals Average Length of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Expenditure per PDE Compdisities resolution rate	Performance Plan (APP) 5.0 days 68.0% R 2.697 100.0% 100.0% 100.0% 100.0%	5.0 days 68.0% R 2.697 100.0% 100.0%	4.7 days 20.5% R 2.472 89.4% 95.5%	5.0 days 68.0% R 2.697 100.0%	4.8 days 25.0% R 2,313 92.0% 94.6%	68.0% R 2,697 100.0% 100.0%	4.7 day 35.9% R 1.494 79.0% 100.0%
Average Length of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution rate Complaint resolution within 25 working days rate rogramme 5: Central Hospital Services Provincial Tertiary Hospitals National Core Standards self assessment rate Quality improvement plan after self assessment rate Patient Expenience of Care Survey Rate Average Length of Stay Inpatient Bod Utilisation Rate Expenditure per PDE	68.0% R 2.697 100.0% 100.0% 100.0%	68.0% R 2,697 100.0% 100.0%	20.5% R 2,472 89.4% 95.5%	68.0% R 2,697 100.0% 100.0%	25.0% R 2,313 92.0% 94.6%	68.0% R 2,697 100.0% 100.0%	35.9% R 1,494 79.0%
Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution with 25 working days rate rodramme 5: Central Hospital Services Provincial Tertiary Hospitals National Core Standards self assessment rate Quality improvement plan after self assessment rate Percentage of Hospitals complaint 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	68.0% R 2.697 100.0% 100.0% 100.0%	68.0% R 2,697 100.0% 100.0%	20.5% R 2,472 89.4% 95.5%	68.0% R 2,697 100.0% 100.0%	25.0% R 2,313 92.0% 94.6%	68.0% R 2,697 100.0% 100.0%	35.99 R 1,49 79.09
Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate rogramme 5: Central Hospital Services Provincial Tertiary Hospitals National Core Standards self assessment rate Quality improvement plan after self assessment rate Percentage of Hospitals complaint with all extreme and vital measures of the national core standards Patient Experience of Care Survey Rate Average Length of Stay Inpatient Bod Utilisation Rate Expenditure per PDE	R 2,697 100.0% 100.0% 100.0% 100.0% 100.0%	R 2,697 100.0% 100.0% 50.0%	R 2,472 89.4% 95.5%	R 2,697 100.0% 100.0%	R 2,313 92.0% 94.6%	R 2,697 100.0% 100.0%	R 1,49- 79.0%
Compaints resolution rate Compaint resolution within 25 working days rate rogramme 5: Central Hospital Services Provincial Tertiary Hospitals National Core Standards self assessment rate Quality improvement plan after self assessment rate Patient Deficial Core Survey Rate Average Length of Stay Inpatient Bod Utilisation Rate Expenditure per PDE	100.0% 100.0% 100.0% 100.0% 100.0%	100.0% 100.0% 50.0%	89.4% 95.5%	100.0% 100.0%	92.0% 94.6%	100.0% 100.0%	79.0%
Complaint resolution within 25 working days rate rogramme 5: Central Hospital Services Provincial Tertiary Hospitals National Core Stundards self assessment rate Quality improvement plan after self assessment rate Percentage of Hospitals complaint with all extreme and vital measures of the national core standards Patient Experience of Care Survey Rate Average Length of Stay Inpatient Bod Utilisation Rate Expenditure per PDE	100.0% 100.0% 100.0% 100.0%	100.0% 50.0%	95.5%	100.0%	94.6%	100.0%	
rogramme 5: Central Hospital Services Provincial Tertiary 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 Bod Utilisation Rate Expenditure per PDE	100.0% 100.0% 100.0%	50.0%					100.09
Provincial Tertiary Hospitals National Core Stundards 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	100.0% 100.0%		50.0%	100.0%	400.00/		
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 Bod Utilisation Rate Expenditure per PDE	100.0% 100.0%		50.0%	100.0%	400.00/		
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	100.0% 100.0%		50.0%	100.0%	400.00/		
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	100.0%	400.00/				100.0%	100.09
Patient Experience of Care Survey Rate Average Length of Stay Inpatient Bed Utilisation Rate Expenditure per PDE		100.0%	100.0%	100.0%	100.0%	100.0%	100.09
Average Length of Stay Inpatient Bed Utilisation Rate Expenditure per PDE		50.0%	0%	100.0%	100.0%	100.0%	100.09
Inpatient Bed Utilisation Rate Expenditure per PDE	100.0%	N/A	0%	N/A	0%	N/A	0'
Expenditure per PDE	7.0 days	7.0 days	6.8 days		7.1 days		6.6 da
	77.0%	77.0%	25.2%	77.0%	27.2%	77.0%	41.0
Complainte regulation rate	R 3,600	R 3,600	R 3,624	R 3,600	R 3,666	R 3,600	R 1,57
	100.0%	100.0%	100.0%	100.0%	94.3%	100.0%	94.2
Complaint resolution within 25 working days rate	95.0%	95.0%	100.0%	95.0%	100.0%	95.0%	98.0
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: Mr. J. Ledwaba Acting Head of Department: Health Limpopo: Tel: (015) 2936294
 This province does not have Central Hospitals

Programme / Subprogramme / Performance Measures	Target for 2015/16 as per	1st Quarter Planned output	1st Quarter Actual output -	2nd Quarter Planned output	2nd Quarter Actual output -	3rd Quarter Planned output	3rd Q Prelin
	Annual Performance Plan (APP)	as per APP	validated	as per APP	validated	as per APP	out
QUARTERLY OUTPUTS							
Programme 1: Administration							
Percentage of Hospitals with broadband access	100.0%	100.0%	100.0%	100.0%	15.2%	100.0%	l
Percentage of fixed PHC facilities with broadband access	50.0%	35.0%	35.8%	43.0%	28.5%	46.0%	l
Programme 2: District Health Services							l
District Management Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard	10% (28/279)	Annual Target	0%	Annual Target	0%	Annual Target	l
Patient Experience of Care rate (PHC Facilities)	75.0%	Annual Target	0%	Annual Tardet Annua Tardet	0%	Annual Target	l
Number of Districts with District Clinical Specialist Teams (DCSTs)	1 1	Annual Target	-	Annua Target	-	Annual Target	l
PHC utilisation rate	2.5	2.5	2.3	2.5	2.2	2.5	l
Complaints resolution rate	85.0%	85.0%	55.3%	85.0%	69.1%	85.0%	l
Complaint resolution within 25 working days rate	85.0%	85.0%	92.4%	85.0%	98.9%	85.0%	l
HIV and AIDS, TB and STI control							l
Total clients remaining on ART	354,991	88,745	257,217	88,745	308,226	88,745	
Client tested for HIV (incl ANC)	1.949.598	487.399	220.824	487.399	249.014	487.399	
TB symptom 5yrs and older screened rate Male condom distribution Rate (annualised)	>95% 20 per male	>95% 20 per male	2.9%	>95% 20 per male	0% 66	>95% 20 per male	ĺ
Female condom distribution Rate (annualised)	20 per male 1,238,628	20 per male 309,657	49	20 per male 309.657	1	20 per male 309.657	l
Medical male circumcision performed - Total	150 000	35 000	8 278	60 000	11 205	20 000	ĺ
TB new client treatment success rate	>85%	>85%	85.8%	>85%	86.1%	>85%	l
TB client lost to follow up rate	<5%	<5%	4.7%	<5%	3.9%	<5%	l
Maternal, child and women health							l
Antenatal 1st visit before 20 weeks rate	55.0%	51.3%	58.8%	52.5%	67.4%	53.8%	l
Mother postnatal visit within 6 days rate	60.0%	52.5%	62.9%	55.0%	62.2%	57.5%	l
Infant 1st PCR test positive around 6 weeks rate	<2%	<2%	1.3%	<2%	1.7%	<2%	l
Immunisation coverage under 1 year (annualised) Measles 2nd dose coverage (annualised)	90.0%	90.0%	88.3% 70.4%	90.0%	84.0% 77.8%	90.0%	l
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate	<15%	<15%	0.7%	<15%	24.5%	90.0% <15%	l
Child under 5 years diarrhoea case fatality rate	11.5%	12.0%	4.7%	11.8%	2.2%	11.7%	l
Child under 5 years pneumonia case fatality rate	5.5%	5.5%	3.6%	5.5%	4.2%	5.5%	l
Child under 5 years severe acute malnutrition case fatality rate	11.5%	12.0%	16.3%	11.8%	11.0%	11.7%	l
School Grade R screening coverage (annualised)	2.0%	0.5%	0%	1.0%	0%	1.5%	l
School Grade 1 screening coverage (annualised)	24.0%	21.0%	6.6%	22.0%	10.0%	23.0%	l
School Grade 8 screening coverage (annualised)	10.0%	6.3%	1.6%	7.5%	4.5%	8.8%	l
Couple year protection rate (annualised)	45.0%	45.0%	47.6% 59.6%	45.0%	59.6%	45.0%	l
Cervical cancer screening coverage (annualised) Vitamin A 12-59 months coverage (annualised)	70.0% 50.0%	62.5% 45.0%	59.6% 38.8%	65.0% 47.0%	73.6% 42.8%	67.5% 49.0%	l
District Hospitals	30.0%	45.0%	30.0%	47.0%	42.0%	49.0%	l
National Core Standards self assessment rate	100.0%	Annual Target	0%	Annual Target	69.6%	Annual Target	l
Quality improvement plan after self assessment rate	100.0%	Annual Target	0%	Annua Target	100.0%	Annual Target	l
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	25.0%	Annual Target	0%	Annua Target	0%	Annual Target	l
Patient Experience of Care Survey Rate	100.0%	Annual Target	0%	Annua Target	4.3%	Annual Target	
Average Length of Stay	3.7 days	3.7 days			4.6 days	3.7 days	ı
Inpatient Bed Utilisation Rate	73.5%	73.5%	23.9%	73.5%	73.3%	73.5%	l
Expenditure per PDE Complaints resolution rate	R 1,985 95.0%	R 1,985	R 1,993 62.0%	R 1,985	R 1,409 74,9%	R 1,985 95.0%	
Complaints resolution rate Complaint resolution within 25 working days rate	95.0% 95.0%	95.0% 95.0%	62.0% 97.2%	95.0% 95.0%	74.9% 86.9%	95.0% 95.0%	ĺ
Disease Prevention and Control	93.0%	95.0%	31.2%	95.0%	00.9%	95.0%	l
Clients screened for hypertension-25 years and older	70,000	20.000	61,700	20.000	383,856	20.000	
Clients screened for diabetes- 5 years and older	70,000	20,000	15,773	20,000	98,470	20,000	i i
Client screened for Mental disorders	0.5%	0.5%	0.1%	0.5%	0.3%	0.5%	ĺ
Client treated for Mental Disorders new	0.5%	0.5%	9.0%	0.5%	6.0%	0.5%	ı
Cataract Surgery Rate annualised	1,000.0	1,000.0	412.0	1,000.0	1,064.8	1,000.0	
Malaria case fatality rate	0.5%	5.0%	0%	0.5%	0.2%	0.5%	ı
Programme 3: Emergency Medical Services							l
EMS P1 urban response under 15 minutes rate	85.0%	85.0%	59.1%	85.0%	73.8%	85.0%	ı
EMS P1 rural response under 40 minutes rate EMS inter-facility transfer rate	75.0% 10.0%	75.0% 10.0%	17.5% 4.1%	75.0% 10.0%	78.5% 43.1%	75.0% 10.0%	l
Programme 4: Provincial Hospital Services	10.0%	10.0%	4.1%	10.0%	43.1%	10.0%	l
General (regional) hospitals	1				I		l
National Core Standards self assessment rate	100.0%	Annual Target	0%	Annual Target	0%	Annual Target	l
Quality improvement plan after self assessment rate	100.0%	Annual Target	0%	Annual Target	0%	Annual Target	ı
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	Annual Target		Annual Target	0%	Annual Target	ı
Patient Experience of Care Survey Rate	100.0%	Annual Target		Annual Target	0%	Annual Target	

Plan (APP)	as per APP	validated	as per APP	Actual output - validated	Planned output as per APP	Preliminary output
4.7 days	4.7 days	4.6 days	4.7 days	4.9 days	4.7 days	4.7 da
75.0% R 2,568 85.0% 85.0% 0% 100.0% 100.0% 100.0% 85.0%	75.0% R 2,368 85.0% 85.0% 0% Annual Target Annual Target Annual Target Annual Target	27.5% R 2,520 55.6% 100.0% 0% 0% 0%	75.0% R 2,768 85.0% 85.0% 0% Annual Tarqet Annual Tarqet Annual Taroet Annual Taroet	81.8% R 2.668 55.1% 96.3% 0% 0% 0%	75.0% R 2,768 85.0% 85.0% 0% Annual Tarqet Annual Tarqet Annual Tarqet Annual Tarqet	80.8 R 2,7-4 57.7' 100.0 0 0 0 0 100.0
5.3 days 75.0% R 3.221 85.0% 85.0%	5.3 days 75.0% R 3,000 85.0% 85.0%	5.9 days 17.0% R 3,656 90.9% 95.0%	5.3 days 75.0% R 3.442 85.0% 85.0%	6.4 days 82.2% R 3.142 94.6% 100.0%	5.3 days 75.0% R 3,442 85.0% 85.0%	7.6 dz 83.3 R 2.8 77.8 100.0
	75.0% R 2.568 85.0% 85.0% 95.0% 100.0% 100.0% 100.0% 5.3 days 75.0% R 3.221 85.0%	75.0% 75.0% R 2.588 85.0% 85.0% 85.0% 85.0% 85.0% 95.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 96.0% 975.0%	75.0% R 2.568 R 2.368 R 2.520 85.0% 85.0% 85.0% 85.0% 100.0% 00% 100.0% Annual Tarcet 0% An	75.0% R 2.588 R 2.508 R 2.500 R 2.768 8 80.0% 85.0% 55.0% 85.0% 100.0% 66.0% 100.0% 67.6 100.0% 67.6 100.0% 67.6 100.0% 67.6 100.0 6	75.0% 75.0% R 2.588 R 2.502 R 2.769 R 2.688 R 2.503 R 2.508 R 2.509 R	75.0% R 2.568 R 2.568 R 2.550 R 2.75% R 2.568 R 2.668 R 2.568 85.0% 85.0% 85.0% 85.0% 85.0% 85.0% 85.0% 85.0% 85.0% 85.0% 85.0% 85.0% 85.0% 85.0% 96.0% 9% 9% 85.0% 96.3

Information submitted by: Dr. A.M. Morake Head of Department
 *This province does not have Central Hospitals

Jarter Ly OutPuTs gramme 1: Administration Percentage of Hospitals with broadband access Percentage of Hospitals with broadband access paramme 2: District Health Services Sibrict Management Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard Percentage of fixed PHC Facilities (PHC Facilities) Number of Districts with District Clinical Specialist Teams (DCSTs) PHC utilisation rate Complaints resolution rate Complaints resolution rate Complaints resolution rate Complaints resolution within 25 working days rate IVI and AIDS, TB and STI control Total clients remaining on ART Total clients and total clients a	30.0% 26.0% 27.0% 80.0% 1 3.0 80.0% 52.999 241.037 30.0%	30.0% 0% 7.0% 80.0% 1 3.0 90.0% 80.0% 46.959 67.490 30.0%	7.1% 0% 0% 1.2% - 2.6 73.1% 94.7%	30.0% 0% 14.0% 80.0% 1 3.0 80.0%	7.1% 0% 0.6% 54.3%	30.0% 13.0%	7.
Percentage of Hospitals with broadband access Percentage of Isked PHC facilities with broadband access paramme 2: District Health Services Sistrict Management Percentage of Isked PHC Facilities scoring above 80% on the ideal clinic dashboard Percentage of Isked PHC Facilities (South Percentage of Isked PHC Facilities) Number of Districts with District Clinical Specialist Teams (DCSTs) PHC utilisation rate Complaints resolution rate Complaints resolution rate Complaints resolution rate Complaints resolution within 25 working days rate IIV and AIDS, TB and STI control Total clients remaining on ART Client tested for HIV (Incl ANC) TS symptom Syrs and older screened rate Male condom distribution Rate (annualised) Medical male circumcision performed - Total TB new client treatment success rate TB client lost to follow up rate Maternal, child and women health Antenatal 1st visit before 20 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR sears departed and the control of the Child under 5 years demonstrated Meases 2nd dose coverage (annualised) Measless 2nd dose coverage (annualised) Measless 2nd dose coverage (annualised) Measless 2nd dose coverage (annualised) School Grade 1 screening coverage (annualised) Measless 3 screening coverage (annualised) Measless 4 screening coverage (annualised) Detect Measless Measless and Screening coverage (annualised) School Grade 1 screening coverage (annualised) Measless 4 screening coverage (annualised) School Grade 1 screening coverage (annualised) Measless 4 screening coverage (annualised) Measless 5 screening coverage (annualised) Measless 6 screening coverage (annualised) Measless 7 screening coverage (annualised) Measless 7 screening coverage (annualised) Measless 7 screening coverage (annualised) Measless 8 screen	26.0% 27.0% 80.0% 1 3.0 80.0% 80.0% 52.999 241.037 30.0%	7.0% 80.0% 1 3.0 80.0% 80.0% 46.959 67.490 30.0%	0% 1.2% - 2.6 73.1%	0% 14.0% 80.0% 1 3.0 80.0%	0%	13.0%	
Percentage of fixed PHC facilities with broadband access pararmme 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 Complaint resolution within 25 working days rate III will and AIDS. The and STI control Total clients remaining on ART Client tested for HIV (find ANC) TB symptom Syrs and older screened rate Male condom distribution Rate (annualised) Medical male circumcision performed - Total TB new client treatment success rate TB client tost for follow up rate Maternal, child and women health Antenatal 1st visit before 20 weeks rate Mother poshnatal visit within 6 days rate Inmunisation coverage under 1 year (annualised) DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate Child under 5 years diarrhoad case fatality rate Child under 5 years diarrhoad case fatality rate Child under 5 years diarrhoad case fatality rate Child under 5 years source acute maintuition case fatality rate Child under 5 years source acute maintuition case fatality rate Child under 5 years source acute maintuition case fatality rate Child under 5 years source acute maintuition case fatality rate Child under 5 years source acute maintuition case fatality rate Child under 5 years source acute maintuition case fatality rate Child under 5 years source acute maintuition case fatality rate Child under 5 years source acute maintuition case fatality rate Child under 5 years source acute maintuition case fatality rate Child under 5 years source acute maintuition case fatality rate Child under 5 years source acute maintuition case fatality rate Child under 5 years discreening coverage (annualised) School Grade 1 screening coverage (annualised) District Hospitals Complaint resolution rate Coupley was professor fatality rate District Hospitals Complaint resolution with a sexeme and older Clients screened for Hospitals complaint with all ex	26.0% 27.0% 80.0% 1 3.0 80.0% 80.0% 52.999 241.037 30.0%	7.0% 80.0% 1 3.0 80.0% 80.0% 46.959 67.490 30.0%	0% 1.2% - 2.6 73.1%	0% 14.0% 80.0% 1 3.0 80.0%	0%	13.0%	
Journame 2: District Health Services Jostrict Management Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard Percentage of fixed PHC Facilities) Number of Districts with District Clinical Specialist Teams (DCSTs) PHC utilisation rate Complaints resolution rate Complaints resolution rate Complaints resolution rate Complaints resolution within 25 working days rate IIV and AIDS, TB and STI control Total clients remaining on ART Collent tested for HIV (Incl ANC) TS symptom Syrs and older screened rate Male condom distribution Rate (annualised) Medical male circumcision performed - Total TB new client treatment success rate TB client lost to follow up rate Maternal, child and women health Antenatal 1st visit before 20 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR veers generate (annualised) Measles 2nd dose coverage (annualised) Measles 2nd dose coverage (annualised) Measles 2nd dose coverage (annualised) School Grade 1s creening coverage (annualised) School Grade 5 screening coverage	27.0% 80.0% 1 3.0 80.0% 80.0% 52.999 241.037 30.0%	7.0% 80.0% 1 3.0 80.0% 80.0% 46.959 67.490 30.0%	0% 1.2% - 2.6 73.1%	14.0% 80.0% 1 3.0 80.0%	0.6%		
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 Complaint resolution within 25 working days rate IIV and AIDS. TB and STI control Total clients remaining on ART Client tested for HIV (find ANC) TB symptom 5vrs and older screened rate Male condom distribution Rate (annualised) Medical male circumcision performed - Total TB new client treatment success rate TB client tost of follow prate Maternal, child and women health Antenal 1st visit before 20 weeks rate Mother postnatal visit within 6 days rate Infrant 1st PCR test possitive around 6 weeks rate Inmunisation coverage under 1 year (annualised) DTaP-IPV/Hib 3. Measles 1st dose drop-out rate Child under 5 years dismose case fatality rate Child under 5 years dismose case fatality rate Child under 5 years dismose case fatality rate Child under 5 years severe acute mainutifico case fatality rate Child under 5 years severe acute mainutifico case fatality rate Child under 5 years severe acute mainutifico case fatality rate Child under 5 years severe acute mainutifico case fatality rate Child under 5 years severe acute mainutifico case fatality rate Child under 5 years severe acute mainutifico case fatality rate School Grade 8 screening coverage (annualised) School Grade 1 screening coverage (annualised) School Grade 7 screen	80.0% 1 3.0 80.0% 80.0% 52.999 241,037 30.0%	80.0% 1 3.0 80.0% 80.0% 46,959 67,490 30.0%	1.2% - 2.6 73.1%	80.0% 1 3.0 80.0%			
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 within 25 working days rate (IV) and AIDS, TB and STI control Total clients remaining on ART Client tested for HIV (Incl ANC) Total clients remaining on ART Client tested for HIV (Incl ANC) Total clients remaining on ART Client tested for HIV (Incl ANC) Tested with the second distribution Rate (annualised) Medical male circumcision performed - Total TB new client treatment success rate TB client lost to follow up rate Maternal, child and women health Antenatal 1st vist before 20 weeks rate Mother postnatal vist within 6 days rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Child under 5 years damnous case fatality rate Child under 5 years service acute mainutition case fatality rate Child under 5 screening coverage (annualised) School Grade 1 screening coverage (annualised) School Grade 5 screening coverage (annualised) Couple year protection rate (annualised) Couple year protection rate (annualised) School Grade 5 screening coverage (annualised) District Hospitals Complaint resolution rate Complaint resolution with 12 Sworking days rate Disease Prevention and Control Clients screened for fypetate along and darker case fatal	80.0% 1 3.0 80.0% 80.0% 52.999 241,037 30.0%	80.0% 1 3.0 80.0% 80.0% 46,959 67,490 30.0%	1.2% - 2.6 73.1%	80.0% 1 3.0 80.0%			
Patient Experience of Care rate (PHC Facilities) Number of Districts with District Clinical Specialist Teams (DCSTs) PHC utilisation rate Complaint resolution within 25 working days rate IIV and AIDS. TB and STI control Total clients remaining on ART Client tested for HIV (find ANC) TB symptom 5yrs and older screened rate Male condom distribution Rate (annualised) Medical male circumcision performed - Total TB client tost for follow up rate Maternal, child and women health Antenal 1st 1st vist before 20 weeks rate Mother postnatal visit within 6 days rate Inmunisation coverage under 1 year (annualised) DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate Child under 5 years diarrhose case fatality rate Child under 5 years diarrhose case fatality rate Child under 5 years severe acute mainutified on Couple year protection at severe in coverage (annualised) School Grade R screening coverage (annualised) School Grade R screening coverage (annualised) Cervical cancer screening coverage (annualised) School Grade R screening coverage (annualised) School G	80.0% 1 3.0 80.0% 80.0% 52.999 241,037 30.0%	80.0% 1 3.0 80.0% 80.0% 46,959 67,490 30.0%	1.2% - 2.6 73.1%	80.0% 1 3.0 80.0%			
Number of Districts with District Clinical Specialist Teams (DCSTs) PHC utilisation rate Complaints resolution rate Complaints resolution rate Complaints resolution rate Complaints resolution within 25 working days rate IIV and AIDS, TB and STI control Total clients remaining on ART Client tested for HIV (fiel ANC) TS symptom Syrs and older screened rate Male condom distribution Rate (annualised) Fernale condom distribution Rate (annualised) Medical male circumcision performed - Total TB new client treatment success rate TB client lost to follow up rate Maternal, child and women health Antenalal 1st visit before 20 weeks rate Mother postnatul visit within 6 days rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR sets positive around 6 weeks rate Infant 1st PCR sets of the set	1 3.0 80.0% 80.0% 52,999 241,037 30.0%	1 3.0 80.0% 80.0% 46.959 67.490 30.0%	- 2.6 73.1%	1 3.0 80.0%	54.3%	20.0%	0.
PHC utilisation rate Complaint resolution within 25 working days rate III van AIDS. TB and STI control Total clients remaining on ART Client tested for HIV (fiel AINC) TB symptom 5yrs and older screened rate Male condom distribution Rate (annualised) Female condom distribution Rate (annualised) Female condom distribution Rate (annualised) Female condom distribution Rate (annualised) TB enve tilent treatment success rate TB new client treatment success rate TB client tost to follow up rate Maternal, child and women health Antenala 11 str visit before 20 weeks rate Mother postnatal visit within 6 days rate Inmunisation coverage under 1 year (annualised) Measles 2nd doese coverage (annualised) DTaP-IPV/Hib 3. Measles 1st dose drop-out rate Child under 5 years diarrhose case fatality rate Child under 5 years diarrhose case fatality rate Child under 5 years severa cutte mainutribino case fatality rate Child under 5 years severa cutte mainutribino case fatality rate Child under 5 years severa cutte mainutribino case fatality rate Child under 5 years severa cutte mainutribino case fatality rate Child under 5 years severage (annualised) School Grade 8 screening coverage (annualised) School Grade 1 screening coverage (annualised) School Grade 5 screening coverage (annualised) Couple year protection rate (annualised) Couple year protection rate (annualised) Olstrict 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 Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution with 12 Sworking days rate Disease Prevention and Control Clients screened for Hoppterison-25 years and older Clients screened for for Mental Biosorders Client screened for for Mental Biosorders Client screened for for Mental Biosorders Client screened for from Houlisation from Medical Services	80.0% 80.0% 52,999 241,037 30.0%	80.0% 80.0% 46.959 67.490 30.0%	73.1%	80.0%		80.0%	61.
Complaints resolution rate Complaints resolution rate Complaint resolution rate Complaint resolution within 25 working days rate HIV and AIDS. TB and STI control Total clients remaining on ART Client tested for HIV (fiel AINC) TB symptom Yes and older screened rate Male condom distribution Rate (annualised) Fernale condom distribution Rate (annualised) Medical male circumcision performed - Total TB new client treatment success rate TB client lost to follow up rate Maternal. child and women health Antenatal 1st visit before 20 weeks rate Uniformal trate of the transport of the t	80.0% 80.0% 52,999 241,037 30.0%	80.0% 80.0% 46.959 67.490 30.0%	73.1%	80.0%	5	1	
Complaint resolution within 25 working days rate IIV and AIDS. TB and STI control Total clients remaining on ART Client tested for HIV (net AIXC) TB symptom Syrs and older screened rate Male condom distribution Rate (annualised) Female condom distribution Rate (annualised) Female condom distribution Rate (annualised) Female condom distribution Rate (annualised) TB new client treatment success rate TB new client treatment success rate TB client tost to follow up rate Maternal, child and women health Antenatal 1st visit before 20 weeks rate Mother poshnatal visit within 6 days rate Inmunisation coverage under 1 year (annualised) Measles 2nd does coverage (annualised) DTaP-IPV/Hib 3. Measles 1st dose drop-out rate Child under 5 years ofference ase fatality rate Child under 5 years diarnhoea case fatality rate Child under 5 years sovere acute mainutrition case fatality rate Child under 5 years sovere acute mainutrition case fatality rate School Grade R screening coverage (annualised) School Grade 1 screening coverage (annualised) School Grade 1 screening coverage (annualised) Couple year protection rate (annualised) Cervical cancer screening coverage (annualised) Ostroit Hospitals National Core Standards self assessment rate Quality improvement plan after self assessment rate Quality improvement plan after self assessment rate Percentage of hospitals complicating with all extereme and vital measures of the national core standards Patient Experience of Care Survey Rate Average Landh of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution rate Complaint resolution rate Complaint resolution of Mental disorders Client screened for righertension-25 years and older Clients screened for fromental Sorders Client screened for fromental Sorders	80.0% 52,999 241,037 30.0%	80.0% 46.959 67,490 30.0%			2.6	3.0	
III and AIDS. TB and STI control Total clients remaining on ART Client tested for HIV (Incl ANC) TB symptom Syrs and older screened rate Male condom distribution Rate (annualised) Fernale condom distribution Rate (annualised) Medical male circumcision performed - Total TB new client treatment success rate TB client lost to follow up rate Maternal. child and women health Antenatal 1st visit before 20 weeks rate Mother postnatul visit within 6 days rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant days and the screening overage (annualised) Measles 2nd dose coverage (annualised) Tapa-PIPVINIs 3 - Measles 1st tose drop-out rate Child under 5 years damhoea case fatality rate Child under 5 years servere acute mainutribin crase fatality rate Child under 5 sears servere acute mainutribin crase fatality rate Child under 5 sears servere acute mainutribin crase fatality rate Child under 5 sears servere acute mainutribin crase fatality rate Child under 5 sears servere acute mainutribin crase fatality rate Child under 5 sears servere acute mainutribin crase fatality rate Child under 5 sears servere acute mainutribin crase fatality rate Child under 5 sears servere acute mainutribin crase fatality rate Child under 5 sears servere acute mainutribin crase fatality rate Child under 5 sears servere acute mainutribin crase fatality rate Child under 5 sears servere acute annualised) School Grade 6 screening coverage (annualised) Vatamin 4 12-58 months coverage (annualised) Vatamin 5 12-58 months coverage (annualised) Vatamin 6 12-58 months coverage (annualised) Vatamin 7 12-58 months coverage (annualise	52,999 241,037 30.0%	46,959 67,490 30.0%	94.7%		75.8%	80.0%	57.
Total clients remaining on ART Client tested for HIV (field ANC) TB symptom 5vrs and older screened rate Male condom distribution Rate (annualised) Female condom distribution Rate (annualised) Female condom distribution Rate (annualised) Medical male circumcision performed - Total TB new client treatment success rate TB client tost to follow up rate Maternal, child and women health Antenalal 1st visit before 20 weeks rate Mother postnatal visit within 6 days rate Inmunisation coverage under 1 year (annualised) Measles 2nd does coverage (annualised) Measles 2nd does coverage (annualised) DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate Child under 5 years diarrhose case fatality rate Child under 5 years diarrhose case fatality rate Child under 5 years severa cutte unaintrition case fatality rate Child under 5 years severa cute maintrition case fatality rate School Grade R screening coverage (annualised) School Grade 1 screening coverage (annualised) School Grade 1 screening coverage (annualised) Cervical cancer screening coverage (annualised) Cervical cancer screening coverage (annualised) District Hospitals National Core Standards self assessment rate Quality improvement plan after 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 Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution with 12 Sworking days rate Disease Prevention and Control Clients screened for Mental Disorders new Clients screened for for Mental disorders Client screened for for Mental disorders Clients screened for for Mental Disorders new Clients screened for free face of the face of the control	241,037 30.0%	67,490 30.0%		80.0%	91.4%	80.0%	100.
Client tested for HIV (incl ANC) TE symptom Syns and older screened rate Male condom distribution Rate (annualised) Fernale condom distribution Rate (annualised) Medical male circumcision performed - Total TE new client treatment success rate TE client lost to follow up rate Maternal, child and women health Antenatal 1st visit before 20 weeks rate Mother postnatury visit within 6 days rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around	241,037 30.0%	67,490 30.0%	43.530	48.979	45.812	50.989	39.8
TB symptom Syrs and older screened rate Male condom distribution Rate (annualised) Female 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 TB client lost to follow up rate Maternal, child and women health Antenalal 1st visit before 20 weeks rate Mother postnatal visit within 6 days rate Infrant 1st PCR test possitive around 6 weeks rate Inmunisation coverage under 1 year (annualised) Measles 2nd does coverage (annualised) DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate Child under 5 years diarrhose case fatality rate Child under 5 years diarrhose case fatality rate Child under 5 years severe auction case fatality rate Child under 5 years severe auction case fatality rate School Grade R screening coverage (annualised) School Grade 1 screening coverage (annualised) School Grade 8 screening coverage (annualised) School Grade 8 screening coverage (annualised) Couple year protection rate (annualised) Cervical cancer screening coverage (annualised) District Hospitals National Core Standards self assessment rate Quality improvement plan after 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 Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution with 12 Sworking days rate Disease Prevention and Control Clients screened for Mental Disorders new Clients screened for for Mental disorders Client screened for for Mental Bisorders new Cataract Surgery Rate annualised Malaria case fatality rate	30.0%	30.0%	43,530 50.078	48,979 69,901	45,812 57,299	50,989 48,207	56.
Male condom distribution Rate (annualised) Fernale condom distribution Rate (annualised) Medical male circumcision performed - Total TB new client treatment success rate TB client lost to follow up rate Maternal, child and women health Antenatal 1st visit before 20 weeks rate Mother postnatal visit whis follow governed to days rate Infant 1st PCR test positive around 6 weeks ra			50,078 38.5%	30.0%	57,299 41.0%	48,207 30.0%	56,
Female condom distribution Rate (annualised) Medical male circumcision performed - Total TB new client treatment success rate TB client tost to follow up rate Maternal, child and women health Antenalal 1st visit before 20 weeks rate Mother postnatal visit within 6 days rate Infant 1st PCR test possitive around 6 weeks rate Inmunisation coverage under 1 year (annualised) Measles 2nd does coverage (annualised) DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate Child under 5 years diarrhose case fatality rate Child under 5 years diarrhose case fatality rate Child under 5 years diarrhose case fatality rate Child under 5 years sover acute unahrutrition case fatality rate School Grade R screening coverage (annualised) School Grade 1 screening coverage (annualised) School Grade 8 screening coverage (annualised) School Grade 5 screening coverage (annualised) Couple year protection rate (annualised) Couple year protection rate (annualised) Ostrict Hospitals National Core 5 brandards self assessment rate Quality improvement plan after 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 Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution with 12 Sworking days rate Disease Prevention and Control Clients screened for Mental Disorders new Clients screened for for Mental Bisorders Client screened for for Mental Bisorders Clients screened for for Mental Bisorders Client screened for for Mental Bisorders sevenamen see the screens of the screen of		37	30.3%	30.0%	21	30.0%	34.
Medical male circumcision performed - Total TB new client treatment success rate TB client lost to follow up rate Maternal, child and women health Antenatal 1st visit before 20 weeks rate Mother postnatul visit whis fo days rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant of the PCR positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant st PCR test positive around 6 weeks rate Infant st PCR test positive around 6 weeks rate Infant st PCR test positive around 6 weeks rate Infant st PCR positive around	1	1	4	3/	1	1	
TB new client treatment success rate TB client lost to follow up rate Maternal, child and women health Antenala 14 st visit before 20 weeks rate Mother postnatal visit within 6 days rate Infant 1st PCR test positive around 6 weeks rate Inmunisation coverage under 1 year (annualised) Measles 2nd does coverage (annualised) DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate Child under 5 years diarnhoea case fatality rate Child under 5 years diarnhoea case fatality rate Child under 5 years severa cutte mainutrition case fatality rate Child under 5 years severa cutte mainutrition case fatality rate School Grade R screening coverage (annualised) 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) District Hospitals National Core 5 brandards self assessment rate Quality improvement plan after 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 Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for Mental Disorders new Clients screened for fine Hand sloorders Client screened for for Mental Bisorders new Clients screened for for Mental Bisorders new Clients screened for fine fate for Mental Disorders new Clients screened for fine fate for Mental Bisorders new Clients screened for fine fate for Mental Bisorders new Clients screened for fine fate for Mental Bisorders new Cataract Surgery Rate annualised Malaria case fatality rate	24 279	5 794	6 687	11 381	1 925	2 276	
TB client lost to follow up rate Maternal, child and women health Antenatal 1st visit before 20 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant and PCR positive around 6 weeks rate Child under 5 years selected as establish rate Child under 5 years selected as establish rate Child under 5 years severe acute mainturition case fatality rate Child under 5 years severe acute mainturition case fatality rate Child under 5 years severe acute mainturition case fatality rate Child under 5 years severe acute mainturition case fatality rate Child under 5 years severe acute mainturition case fatality rate Child under 5 years severe acute mainturition case fatality rate Child under 5 years severe acute mainturition case fatality rate Child under 5 years severe acute mainturition case fatality rate Child under 5 years severe acute and positive rate Valuation of Case Survice acute and positive rate Infantion of Case Survice Acute Infantion Severe PDE Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for Mental disorders Client screened for for Mental disorders	95.0%	95.0%	75.7%	95.0%	76.8%	95.0%	75.
Maternal, child and women health Antenalal 1st visit before 20 weeks rate Mother postnatal visit within 6 days rate Infant 1st PCR test positive around 6 weeks rate Inmunisation coverage under 1 year (annualised) Measles 2nd does coverage (annualised) DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate Child under 5 years diarrhose case fatality rate Child under 5 years diarrhose case fatality rate Child under 5 years severe auction case fatality rate Child under 5 years severe auction case fatality rate Child under 5 years severe auction case fatality rate Child under 5 years severe auction case fatality rate School Grade R screening coverage (annualised) School Grade 8 screening coverage (annualised) School Grade 8 screening coverage (annualised) School Grade 9 screening coverage (annualised) Cenvical cancer screening coverage (annualised) District Hospitals National Core 5 brandards self assessment rate Quality improvement plan after 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 Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for Mental Bisorders Client screened for Mental Bisorders everage and older Clients screened for for Mental Bisorders everages and older Clients screened for for Mental Bisorders everages and older Clients screened for for Mental Bisorders everages and solder Clients screened for for Mental Bisorders everages and solder Clients screened for for Mental Bisorders everages and solder Clients screened for Mental Bisorders everages and older Clients screened for femaler desorders Client screened for from femaler desorders Client screened for from femaler desorders Client screened for femaler desorders	6.0%	6.0%	7.4%	6.0%	5.5%	6.0%	7.
Antenatal 1st visit before 20 weeks rate Mother postnatal visit whin 6 days rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant 1st PCR test positive around 6 weeks rate Infant and test positive around 6 weeks rate Infant and 1st PCR positive around 6 weeks rate Infant and 1st PCR positive around 6 weeks rate Infant under 5 years darchoea case fatality rate Child under 5 years severe acute mainutrition case fatality rate Child under 5 years severe acute mainutrition case fatality rate Child under 5 years severe acute mainutrition case fatality rate Child under 5 sercening coverage (annualised) School Grade 6 screening coverage (annualised) School Grade 5 screening coverage (annualised) Couple year protection rate (annualised) Vitarin A 12-59 months coverage (annualised) Vitarin Coverage (annualised) Vitarin Coverage (annualised) Vitarin A 12-59 months coverage (annualised) Vitarin A	0.070	0.070	1.470	0.070	0.070	0.070	
Mother postnatal visit within 6 days rate Infant 1st PCR test positive around 6 weeks rate Inmunisation coverage under 1 year (annualised) Measles 2nd does coverage (annualised) DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate Child under 5 years diarnhose case fatality rate Child under 5 years diarnhose case fatality rate Child under 5 years severe auctic maintriving case fatality rate Child under 5 years severe auctic maintriving case fatality rate Child under 5 years severe auctic maintriving case fatality rate School Grade R screening coverage (annualised) School Grade 8 screening coverage (annualised) School Grade 8 screening coverage (annualised) School Grade 9 screening coverage (annualised) Cenvical cancer screening coverage (annualised) Ostrict Hospitals Vitamin A 12-59 months coverage (annualised) Sistrict Hospitals National Core Standards self assessment rate Quality improvement plan after 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 Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for highertesion-25 years and older Clients screened for for Mental disorders Client screened for for Mental disorders Client screened for for Mental Bisorders new Cataract Surgery Rate annualised Malaria case fatality rate Doramma 2 : Emergency Medical Services	62.0%	62.0%	60.8%	62.0%	82.9%	62.0%	62.
Immunisation coverage under 1 year (annualised) Measies 2nd does coverage (annualised) DTaP-IPV/Hib 3 - Measies 1st dose drop-out rate Child under 5 years darchoe a case fatality rate Child under 5 years darchoe a case fatality rate Child under 5 years severe auctic mainutrition case fatality rate Child under 5 years severe auctic mainutrition case fatality rate School Grade R screening coverage (annualised) School Grade 1 screening coverage (annualised) School Grade 8 screening coverage (annualised) School Grade 8 screening coverage (annualised) Couple year protection rate (annualised) Cervical cancer screening coverage (annualised) Strict Hospitals Vitamin A 12-59 months coverage (annualised) Strict Hospitals National Core Standards self assessment rate Quality improvement plan after 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 Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for highetes-5 years and older Clients screened for fypertension-25 years and older Clients screened for fypertension-25 years and older Clients screened for for Mental disorders Client treated for Mental Bisorders new Cataract Surgery Rate annualised Malaria case fatality rate Doramma 2: Emercency Medical Services	55.0%	50.0%	55.6%	53.0%	51.8%	55.0%	53
Measles 2nd dose coverane (annualised) DTaP-IPV/His 3 - Measles 1st dose drop-out rate Child under 5 years diarrhosa case fatality rate Child under 5 years neumonia case fatality rate School Grade 1 screening coverage (annualised) School Grade 5 screening coverage (annualised) School Grade 5 screening coverage (annualised) Couple year protection rate (annualised) Couple year protection rate (annualised) Vitamin A 12-59 months coverage (annualised) Patrick Hospitals compliant with all extreme and vital measures of the national core standards Patent Experience of Care Survey Rate Average Length of Stav Impedient Bed Utilisation Rate Compliant resolution rate Compliant resolution rate Compliant resolution within 25 working days rate Disease Prevention and Control Clients screened for ripoperansion-25 years and older Clients screened for fyeoterision-25 years and older Clients screened	1.9%	1.9%	2.4%	1.9%	3.6%	1.9%	2
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate Child under 5 years darchoac sea fatality rate Child under 5 years darchoac sea fatality rate Child under 5 years severe aucte mainutrition case fatality rate School Grade R screening coverage (annualised) School Grade I screening coverage (annualised) School Grade I screening coverage (annualised) School Grade B screening coverage (annualised) Couple year protection rate (annualised) Cervical cancer screening coverage (annualised) Vatramin A 12-59 months coverage (annualised) District Hospitals National Core 59 months coverage (annualised) District Hospitals National Core Standards self assessment rate Quality improvement plan after 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 Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution with 12 Sworking days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for fypertension-25 years and older Clients screened for fypertension-25 years and older Clients screened for for Mental disorders Client treated for Mental Disorders new Cataract Surgery Rate annualised Mataria case fatality rate Journamm 2 : Emercency Medical Services	98.0%	98.0%	85.3%	98.0%	80.7%	98.0%	83.
Child under 5 years diarrhoea case fatality rate Child under 5 years neumonia case fatality rate Child under 5 years severe acute mainutrition case fatality rate Child under 5 years severe acute mainutrition case fatality rate School Grade 1 screening coverage (annualised) School Grade 5 screening coverage (annualised) Couple year protection rate (annualised) Couple year protection rate (annualised) Couple year protection rate (annualised) Utamin A 12-59 months coverage (annualised) Vitamin A 12-59 months cover	85.0%	85.0%	69.2%	85.0%	77.5%	85.0%	74.
Child under 5 years oneumonia case fatality rate Child under 5 years severe acute mainutifition case fatality rate School Grade R screening coverage (annualised) School Grade I screening coverage (annualised) School Grade I screening coverage (annualised) School Grade I screening coverage (annualised) Cenvical cancer screening coverage (annualised) Cenvical cancer screening coverage (annualised) Static Hospitals National Core 5 months coverage (annualised) Static Hospitals National Core Standards self assessment rate Quality improvement plan after self assessment rate Quality improvement plan after self assessment rate Average Lendh of Stay Inpatent Experience of Care Survey Rate Average Lendh of Stay Inpatent Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution with 12 Sworking days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for Mental Disorders events Client treated for Mental Disorders new Cataract Surgery Rate annualised Mataria case fatality rate Jorannam 2 Emeroency Medical Services	<20%	<20%	6.2%	<20%	13.9%	<20%	11.
Child under 5 years severe acute mainutrition case fatality rate School Grade 1 screening coverage (annualised) School Grade 1 screening coverage (annualised) School Grade 5 screening coverage (annualised) Couple year protection rate (annualised) Couple year protection rate (annualised) Couple year protection rate (annualised) Vitamin A 12-59 months coverage (annualised) Vitamin A 12-59 months coverage (annualised) District Hospitalis 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 Lenoth of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for hypertension-25 years and older Clients screened for Mental disorders Client treated for Mental Disorders over Client screened for Mental Disorders overagement of Maintalised Malaria case fatality rate Journamm as Emercency Medical Services	2.8/1000	2.8/1000	1.6%	2.8/1000	1.0%	2.8/1000	2.
School Grade its screening coverage (annualised) Cenvical cancer screening coverage (annualised) Olstrict Hospitals National Core Standards self assessment rate Quality improvement plan after 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 Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for Mental Disorders of Client screened for Mental Disorders of Client screened for Mental Disorders new Client standard of Mental Disorders new Cataract Surgery Rate annualised Mataria case fatality rate Journamm 25: Emercency Medical Services	2.8/1000	2.8/1000	1.1%	2.8/1000	1.2%	2.8/1000	0
School Grade 1 screening coverage (annualised) School Grade 5 screening coverage (annualised) Couple year protection rate (annualised) Couple year protection rate (annualised) Vitamin A 12-59 months coverage (annualised) Vitamin A 12-59 months coverage (annualised) Vitamin A 12-59 months coverage (annualised) Institut Nossitials National Core Standards self assessment rate Quality improvement plan after self assessment rate Percentage of Hospitals compilant with all extreme and vital measures of the national core standards Patient Experience of Care Survey Rate Average Lentoh of Stay Impatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for fypertension-25 years and older Clients screened for fwhental disorders Client treated for Mental Disorders of Client screened for Mental Disorders Client treated for Mental Disorders new Catarract Surgery Rate annualised Mataria case fatality rate Dorarmam 2: Emercency Medical Services	10.0%	10.0%	8.6%	10.0%	7.4%	10.0%	9
School Grade 8 screening coverage (annualised) Couple year protection rate (annualised) Cervical cancer screening coverage (annualised) Startic Hospitals National Core 5 months coverage (annualised) Stational Core 5 months coverage (annualised) Stational Core 5 months coverage (annualised) Percentage of Hospitals compliant with all extreme and vital measures of the national core standards Patient Experience of Care Survey Rate Average Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution with 12 sworking days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for Mental Goorders Client screened for Mental Biocorders Client tested for Mental Disorders new Cataract Surgery Rate annualised Malaria case fatality rate Journamm 2 : Emercency Medical Services	30.0%	30.0%	3.3%	30.0%	11.3%	30.0%	2
Couple year protection rate (annualised) Cervical cancer screening coverage (annualised) Vitamin A 12-59 months coverage (annualised) Vitamin A 12-59 months coverage (annualised) Instrict 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 Lenath of Stay Impatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Occupitant resolution within 25 working days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for hypertension-25 years and older Clients screened for Mental disorders Client treated for Mental Disorders Client treated for Mental Disorders or Client screened Rate annualised Mataria case fatality rate Desarramm 2: Emercency Medical Services	30.0%	30.0%	31.2%	30.0%	19.2%	30.0%	10
Cervical cancer screening coverage (annualised) Vitamin A 12-59 months coverage (annualised) Vitamin A 12-59 months coverage (annualised) Vitamin A 12-59 months coverage (annualised) 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 Lenath of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for fypertension-25 years and older Clients screened for Mental disorders Client treated for Mental disorders Client treated for Mental Disorders new Cataract Surgery Rate annualised Mataria case fatality rate Journamm 25 Emercency Medical Services	25.0%	25.0%	12.4%	25.0%	7.8%	25.0%	8
Vitamin A 12-59 months coverage (annualised) Issirtici Hospitals National Core Standards self assessment rate Quality improvement plan after self assessment rate Percentage of Hospitals corrollant with all extreme and vital measures of the national core standards Patient Experience of Care Survey Rate Average Length of Stay Impatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for hypertension-25 years and older Clients screened for Mental disorders Client treated for Mental Disorders Client treated for Mental Disorders new Catarract Surgery Rate annualised Mataria case fatality rate Jordanna 15 Enercency Medical Services	45.0%	45.0%	24.1%	45.0%	28.2%	45.0%	27
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 Lenoth of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for fyebrate and older Clients screened for Mental disorders Client treated for Mental Disorders new Cataract Surgery Rate annualised Mataria case fatality rate Materia Care Ferrederox Medical Services	55.0%	55.0%	41.1%	55.0%	50.9%	55.0%	48
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 Averange Length of Stay Impatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate of Stay Unique Stay Stay Stay Stay Stay Stay Stay Stay	42.0%	42.0%	44.2%	42.0%	47.0%	42.0%	48
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 Lendrh of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for floateders Client screened for Mental disorders Client treated for Mental disorders Client screened rate and the control Clients screened rate and the control Clients screened rate and the control Client screened rate and the cont	400.007	100.00/		400.00/	400.007	400.00/	
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 Ingalient Red Utilisation Rate Expenditure per PDE Complaints resolution rate Complaints resolution within 25 working days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for Mental disorders Client screened for Mental disorders Client treated for Mental Disorders new Catarract Surgery Rate annualised Mataria case fatality rate Journamme 3: Emercency Medical Services	100.0%	100.0%	0%	100.0%	100.0%	100.0%	100
Patient Experience of Care Survey Rate Average Lendr of Stay Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution rate Obsease Prevention and Control Clients screened for highertension-25 years and older Clients screened for highertension-25 years and older Clients screened for Mental disorders Client screened for Mental disorders Client treated for Mental disorders Client treated for Mental disorders Matient Cataract Surgery Rate annualised Matient case fatality rate Matient Cataract Surgery Rate annualised Matient case fatality rate	100.0% 27.0%	100.0% 9.0%	0% 0%	100.0% 9.0%	100.0% 100.0%	100.0% 9.0%	100 100
Average Lendth of Stav Inpatient Bed Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for highertension-25 years and older Clients screened for dispetension-25 years and older Clients screened for Mental disorders Client screened for Mental disorders Client treated for Mental Disorders new Catarract Surgery Rate annualised Mataria case fatality rate oranna 25 Emercency Medical Services	80.0%	80.0%	0%	80.0%	72.7%	80.0%	81.
Inpatient Bod Utilisation Rate Expenditure per PDE Complaints resolution rate Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for debetes - 5 years and older Clients screened for Mental disorders Client screened for Mental disorders Client treated for Mental Disorders new Cataract Surgery Rate annualised Malaria case fatality rate Organized Surgery Rate annualised Malaria case fatality rate Organized Surgery Rate annualised Malaria case fatality rate Organized Surgery Rate Surgery Ra	3.5 days	3.5 days	3.5 days	3.5 days	3.3 days	3.5 days	3.2
Expenditure per PDE Compolaints resolution rate Compolaint resolution rate Compolaint resolution within 25 working days rate Discase Prevention and Control Clients screened for highertension-25 years and older Clients screened for debetes- 5 years and older Clients screened for Mental disorders Client treated for Mental Disorders new Cataract Surgery Rate annualised Mataria case fatality rate Journamme 3: Emercency Medical Services	63.0%	63.0%	60.4%	63.0%	5.3 days 61.0%	63.0%	58
Complaints resolution rate Complaint resolution rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for hypertension-25 years and older Clients screened for debetes - 5 years and older Clients screened for Mental disorders Client treated for Mental Disorders Client treated for Mental Disorders new Cataract Surgery Rate annualised Malaria case fatality rate Materia case fatality rate Descriptions Description Descripti	R 1,720	R 1,720	R 2,668	R 1,720	R 2,475	R 1,720	R 2,
Complaint resolution within 25 working days rate Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for Mental disorders Client screened for Mental disorders Client treated for Mental Disorders new Cataract Surgery Rate annualised Malaria case fatality rate Malaria case fatality rate	80.0%	80.0%	73.7%	80.0%	87.0%	80.0%	34
Disease Prevention and Control Clients screened for hypertension-25 years and older Clients screened for highest end older Clients screened for disbetes - 5 years and older Clients screened for Mental disorders Client treated for Mental Disorders new Cataract Surgery Rate annualised Malaria case fatality rate Disorders Research Control of the Contro	80.0%	80.0%	100.0%	80.0%	100.0%	80.0%	100
Clients screened for hypertension-25 years and older Clients screened for diabetes -5 years and older Client screened for diabetes -5 years and older Client treated for Mental Disorders new Cataract Surgery Rate annualised Malaria case fatality rate material case fatality rate	55.076	55.076	100.070	55.076	100.070	55.076	.00
Clients screened for diabetes - 5 years and older Client screened for Mental disorders Client treated for Mental disorders Client treated for Mental Disorders new Cataract Surgery Rate annualised Malaria case fatality rate programme 3: Emergency Medical Services		27,951	40,792	27,190	46,549	26,646	52,
Client screened for Mental disorders Client treated for Mental Disorders new Cataract Surgery Rate annualised Malaria case fatality rate Description of the Comment of the	108,759	27,951	14,171	27,190	17,310	26,646	27,
Cataract Surgery Rate annualised Malaria case Itatily and the services paramme 3: Emeraency Medical Services	108,759 108,759	15.0%	0.4%	15.0%	0.5%	15.0%	1.
Cataract Surgery Rate annualised Malaria case Itatily and the services paramme 3: Emeraency Medical Services		2.0%	100.0%	2.0%	23.6%	2.0%	18
Malaria case fatality rate poramme 3: Emergency Medical Services	108,759	349/1000000	822.8	349/1000000	947.1	348/1000000	1,49
	108,759 15.0%	0%	0%	0%	0%	0%	
	108,759 15.0% 2.0%						
EINIO F I UIDAN TESPONSE UNDER 13 MINUTES PALE	108,759 15.0% 2.0% 1395/1000000	60.0%	53.5%	60.0%	69.1%	60.0%	53
EMS P1 rural response under 40 minutes rate	108,759 15.0% 2.0% 1395/1000000	40.0%	53.5%	40.0%	39.4%	40.0%	39
EMS inter-facility transfer rate	108,759 15.0% 2.0% 1395/1000000 0%	10.0%	14.4%	10.0%	16.1%	10.0%	15
ogramme 4: Provincial Hospital Services	108,759 15.0% 2.0% 1395/1000000 0% 60.0%						
General (regional) hospitals	108,759 15.0% 2.0% 1395/1000000 0% 60.0% 40.0%						
National Core Standards self assessment rate	108.759 15.0% 2.0% 1395/1000000 0% 60.0% 40.0% 10.0%		0%	100.0%	100.0%	100.0%	100
Quality improvement plan after self assessment rate	108,759 15.0% 2.0% 1395/1000000 0% 60.0% 40.0% 10.0%	100.0%	0%	100.0%	100.0%	100.0%	100
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards Patient Experience of Care Survey Rate	108.759 15.0% 2.0% 1395/1000000 0% 60.0% 40.0% 10.0%	100.0% 100.0% 100.0%	0%	100.0%	0% 100.0%	100.0% 80.0%	100

Target for 2015/16 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarte Preliminary output
4.8 days	4.8 days	4.7 days	4.8 days	4.4 days	4.8 days	5.1 d
72.0% R 2,570 80.0% 80.0%	72.0% R 2,570 80.0% 80.0%	102.9% R 3,410 57.1% 100.0%	72.0% R 2,570 80.0% 80.0%	97.4% R 2,531 0% 0%	72.0% R 2,570 80.0% 80.0%	105. R 2.
100.0%	100.0%	0%	100.0%	100.0%	100.0%	100
100.0% 80.0%	100.0% 80.0%	0% 100.0%	100.0% 80.0%	0% 100.0%	100.0% 80.0%	100
74.0% R 3,736 80.0%	74.0% R 3,736 80.0%	71.8% R 4,502 14.3%	74.0% R 3,736 80.0%	74.6% R 3,504 100.0%	74.0% R 3,736 80.0%	75 R 3 100
80.0%	80.0%	100.0%	80.0%	77.1%	80.0%	100
	2015/fe as per Annual Performance Plan (APP) 4.8 days 72.0% 80.0% 80.0% 100.0% 5.5 days 74.0% 8.3736 80.0%	2015/f as per Annual Performance Plan (APP) 4.8 days 72.0% R 2.570 80.0% 80.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 80.0% 80.0% 80.0% 80.0% 80.0% 80.0% 80.0% 80.0% 80.0% 80.0% 80.0% 80.0% 80.0%	2015/f as per Annual Parformance Plan (APP)	Actual output	Actual output	2015/16 as per Annual Actual output as per APP Annual Annual Performance Plan (APP) All days 4.8 days 4.8 days 4.8 days 4.8 days 72.0% 72.

Information submitted by: Ms G. Matlaopane Head of Department: Health Northern Cape: Tel: (053) 830 0806
 *This province does not have Central Hospitals

ector: Health	Target for	1st Quarter	1st Quarter	2nd Quarter	2nd Quarter	3rd Quarter	3rd Quarter
rogramme / Subprogramme / Performance Measures	Target for 2015/16 as per Annual	Planned output as per APP	Actual output - validated	Planned output as per APP	Actual output - validated	Planned output as per APP	Preliminary output
	Performance Plan (APP)						
UARTERLY OUTPUTS	rian (Arr)						
rogramme 1: Administration							
Percentage of Hospitals with broadband access	46.3%	38.9%	37.0%	40.7%	37.0%	42.6%	42.69
Percentage of fixed PHC facilities with broadband access	54.2%	15.2%	15.4%	28.2%	30.9%	41.2%	49.69
rogramme 2: District Health Services							
District Management Percentage of fixed PHC Facilities scoring above 80% on the ideal clinic dashboard	Implementation	Implementation	0%	Implementation	0%	Implementation	09
reicentage of fixed Fric Facilities scotting above 80 % off the ideal clinic dashboard	delayed	delaved	0 76	delaved	076	delaved	0,
Patient Experience of Care rate (PHC Facilities)	39.4%	4.3%	0%	8.7%	5.4%	13.0%	9.09
Number of Districts with District Clinical Specialist Teams (DCSTs)	Not applicable in	Not applicable in	N/a	Not applicable in	N/a	Not applicable in	N/
	W Cape	W Cape		W Cape		W Cape	
PHC utilisation rate	2.3	2.3	2.3	2.3	2.3	2.3	2.
Complaints resolution rate	93.7%	93.8%	95.7%	93.8%	94.3%	93.7%	91.49
Complaint resolution within 25 working days rate	93.7%	93.7%	95.8%	93.6%	96.6%	93.8%	98.59
HIV and AIDS, TB and STI control							
Total clients remaining on ART	188,983	168,769	187,686	176,433	189,458	183,318	169,30
Client tested for HIV (incl ANC) TB symptom 5yrs and older screened rate	1,103,372 3.1%	262,768 3.1%	300,610 8.7%	283,632 3,1%	357,530 12,3%	282,215 3.1%	409,79 16.19
Male condom distribution Rate (annualised)	3.1%	3.1% 58	8.7% 50	3.1% 58	12.3%	3.1% 58	16.19
Female condom distribution Rate (annualised)	58	58 1	50	38	51 4	38	5
Medical male circumcision performed - Total	22 899	2 061	3 508	5 496	3 821	5 954	3 51
TB new client treatment success rate	84.6%	84.6%	84.6%	84.6%	83.7%	84.6%	84.19
TB client lost to follow up rate	7.3%	7.3%	9.0%	7.3%	8.6%	7.3%	8.99
Maternal, child and women health							
Antenatal 1st visit before 20 weeks rate	63.2%	63.2%	65.4%	63.2%	67.5%	63.2%	69.99
Mother postnatal visit within 6 days rate	78.7%	78.7%	87.3%	78.7%	85.5%	78.7%	74.39
Infant 1st PCR test positive around 6 weeks rate	1.4%	1.4%	1.1%	1.4%	0.8%	1.4%	0.99
Immunisation coverage under 1 year (annualised)	93.8%	94.4%	90.9%	94.4%	91.9%	89.8%	98.39
Measles 2nd dose coverage (annualised)	77.5%	78.0%	71.8%	77.9%	75.4%	74.1%	79.69
DTaP-IPV/Hib 3 - Measles 1st dose drop-out rate	4.3%	4.3%	5.3%	4.3%	7.4%	4.3%	- 3.29
Child under 5 years diarrhoea case fatality rate Child under 5 years pneumonia case fatality rate	0.2%	0.2%	0.1%	0.2%	0.1%	0.2% 0.5%	0.49
Child under 5 years preumonia case ratality rate Child under 5 years severe acute malnutrition case fatality rate	4.2%	4.5%	2.0%	4.5%	0.3%	3.9%	0.29
School Grade R screening coverage (annualised)	9.5%	9.6%	33.1%	9.6%	22.6%	9.3%	35.09
School Grade 1 screening coverage (annualised)	24.2%	24.5%	68.6%	24.6%	42.5%	23.8%	78.09
School Grade 8 screening coverage (annualised)	0.1%	0.1%	10.0%	0.1%	11.5%	0.1%	14.79
Couple year protection rate (annualised)	74.3%	75.3%	60.1%	75.4%	61.2%	73.1%	58.99
Cervical cancer screening coverage (annualised)	59.2%	60.0%	52.3%	60.1%	60.1%	58.3%	62.89
Vitamin A 12-59 months coverage (annualised)	44.0%	44.3%	45.5%	44.3%	45.9%	42.1%	54.09
District Hospitals							
National Core Standards self assessment rate	100.0%	11.8%	2.9%	20.6%	0%	32.4%	35.39
Quality improvement plan after self assessment rate	100.0%	100.0%	100.0%	100.0%	0%	100.0%	33.39
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	38.2%	25.0%	0%	42.9%	0%	36.4%	25.09
Patient Experience of Care Survey Rate Average Length of Stay	100.0% 3.1 days	11.8% 3.1 days	0% 3.5 days	20.6% 3.1 days	2.9% 3.4 days	32.4% 3.0 days	35.39 3.2 day
Inpatient Bed Utilisation Rate	3.1 days 86.9%	3.1 days 87.2%	93.2%	3.1 days	3.4 days 91.4%	3.0 days 84.3%	3.2 day 83.99
Expenditure per PDE	R 1,945	R 1,883	93.2% R 1,747	87.4% R 1,995	R 1,943	R 1,929	R 1,96
Complaints resolution rate	94.1%	94.1%	87.4%	94.1%	90.4%	94.1%	85.19
Complaint resolution within 25 working days rate	93.5%	93.6%	87.4%	93.6%	93.6%	93.6%	96.49
Disease Prevention and Control							
Clients screened for hypertension-25 years and older	Data system to	Data system to	-	Data system to	-	Data system to	-
	be established	be established		be established		be established	
Clients screened for diabetes- 5 years and older	Data system to	Data system to	-	Data system to	-	Data system to	-
0	be established	be established		be established		be established	
Client screened for Mental disorders	Data system to	Data system to	0%	Data system to	0%	Data system to	09
Client treated for Montal Discoders and	be established	be established		be established	001	be established	
Client treated for Mental Disorders new	Data system to be established	Data system to be established	0%	Data system to be established	0%	Data system to be established	09
Cataract Surgery Rate annualised	1,725.4	1,667.9	1.607.9	1.977.8	1.629.3	1,640.5	2.035.0
Malaria case fatality rate	2.3%	3.0%	9.5%	3.0%	1,629.3	3.1%	2,035.0
rogramme 3: Emergency Medical Services	2.370	3.0%	3.376	3.0%	076	3.170	0,
EMS P1 urban response under 15 minutes rate	75.0%	75.0%	62.2%	75.0%	66.3%	75.0%	58.39
EMS P1 rural response under 40 minutes rate	90.0%	90.0%	81.6%	90.0%	82.3%	90.0%	80.69
EMS inter-facility transfer rate	23.0%	23.0%	42.1%	23.0%	42.0%	23.0%	38.89
rogramme 4: Provincial Hospital Services							
General (regional) hospitals							
National Core Standards self assessment rate	100.0%		0%	0%	0%	0%	09
Quality improvement plan after self assessment rate Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	-	0% 0%	0% 0%	0% 0%	0% 0%	09

rogramme / Subprogramme / Performance Measures	Target for 2015/16 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Preliminary output
QUARTERLY OUTPUTS	Tian (ALL)	1					
Average Length of Stay	3.7 days	3.7 days	3.9 days	3.7 days	3.8 days	3.7 days	3.8 day
Innatient Bed Utilisation Rate	87.0%	86.8%	89.6%	86.8%	89.5%	86.8%	88.39
Expenditure per PDE	R 2.787	R 2.826	R 2.601	R 2.804	R 2.773	R 2.805	R 2.74
Complaints resolution rate	98.4%	98.9%	95.8%	98.9%	100.0%	96.8%	100.0
Complaint resolution within 25 working days rate	98.3%	98.9%	100.0%	97.8%	96.9%	98.3%	95.8
Programme 5: Central Hospital Services	0%	0%	0%	0%	0%	0%	0
Provincial Tertiary Hospitals							
National Core Standards self assessment rate	Yes	No	0%	No	0%	No	0'
Quality improvement plan after self assessment rate	Yes	No	0%	No	0%	No	0
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	Yes	No	0%	No	0%	No	0
Patient Experience of Care Survey Rate	Yes	No	0%	No	0%	No	0
Average Length of Stay	3.8 days	3.8 days	4.0 days	3.9 days	4.0 days	3.7 days	3.9 da
Inpatient Bed Utilisation Rate	84.0%	87.7%	86.5%	85.3%	82.3%	79.2%	79.1
Expenditure per PDE	R 5,217	R 5,046	R 4,548	R 5,060	R 5,624	R 5,434	R 5,13
Complaints resolution rate	92.1%	92.1%	100.0%	92.1%	100.0%	92.1%	100.0
Complaint resolution within 25 working days rate	109.4%	108.6%	79.6%	108.6%	100.0%	108.6%	100.0
Central Hospital Services							
National Core Standards self assessment rate	100.0%	-	0%	0%	0%	0%	0
Quality improvement plan after self assessment rate	100.0%		0%	0%	0%	0%	0
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%		0%	0%	0%	0%	0
Patient Experience of Care Survey Rate	100.0%	-	0%	0%	0%	0%	0
Average Length of Stay	6.2 davs	6.1 davs	6.3 davs		6.3 davs	6.1 davs	6.2 da
Inpatient Bed Utilisation Rate	85.9%	85.0%	87.8%	87.4%	88.6%	86.2%	86.6
Expenditure per PDE	R 4,532	R 4,564	R 4,292	R 4,393	R 4,444	R 4,575	R 4,51
Complaints resolution rate	98.5%	98.2%	91.4%	98.2%	91.7%	98.2%	91.5
Complaint resolution within 25 working days rate	85.0%	84.9%	84.2%	84.9%	86.1%	84.9%	91.6

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