

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 2nd Quarter
EASTERN CAPE
Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 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 Preliminary output
QUARTERLY OUTPUTS					
Programme 1: Administration					
Percentage of Hospitals with broadband access	51.0%	17.0%	0%	26.0%	0%
Percentage of fixed PHC facilities with broadband access	49.0%	25.0%	0%	25.0%	0%
Programme 2: District Health Services					
District Management					
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	10.0%	25.0%	0%	25.0%	0%
Client Satisfaction Survey Rate (PHC)	75.0%	6.5%	6.5%	32.4%	45.5%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	8	-	-	-	-
PHC utilisation rate	2.8	2.8	2.8	2.8	2.8
Complaints resolution rate (PHC)	94.0%	80.0%	82.8%	80.0%	86.7%
Complaint resolution within 25 working days rate (PHC)	99.0%	80.0%	120.8%	80.0%	97.8%
District Hospitals					
National Core Standards self assessment rate (District Hospitals)	91.0%	25.0%	6.1%	25.0%	34.8%
Quality improvement plan after self assessment rate (District Hospitals)	100.0%	-	0%	50.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	12.0%	25.0%	12.5%	25.0%	0%
Client Satisfaction Survey Rate (District Hospitals)	91.0%	50.0%	4.5%	50.0%	30.3%
Average Length of Stay (District Hospitals)	490.0%	490.0%	5.0 days	490.0%	5.1 days
Inpatient Bed Utilisation Rate (District Hospitals)	65.0%	65.0%	35.9%	65.0%	59.0%
Expenditure per PDE (District Hospitals)	R 2 382	R 2 382	R 2 443	R 2 382	R 2 277
Complaints resolution rate (District Hospitals)	80.0%	80.0%	94.1%	80.0%	94.6%
Complaint Resolution within 25 working days rate (District Hospitals)	80.0%	80.0%	97.0%	80.0%	100.4%
HIV and AIDS, STI and TB (HAST)					
Adults remaining on ART – Total	473 089	390 089	349 030	418 187	350 321
Total Children (under 15 years) remaining on ART – Total	24 786	21 736	19 647	22 754	18 975
TB/HIV co-infected client on ART rate	90.0%	90.0%	96.6%	90.0%	94.8%
Client tested for HIV (incl ANC)	1453 837	363 459	446 426	363 459	528 939
TB symptom 5yrs and older screened rate	70.0%	70.0%	27.2%	70.0%	33.0%
Male condom distribution Coverage	50	50	56	50	61
Medical male circumcision performed - Total	63 556	15 352	2 898	11 425	2 871
TB client treatment success rate	83.0%	83.0%	82.6%	83.0%	83.3%
TB client lost to follow up rate	7.2%	7.2%	7.8%	7.2%	7.3%
Maternal, Child and Women's Health and Nutrition (MCWH&N)					
Antenatal 1st visit before 20 weeks rate	65.0%	65.0%	62.8%	65.0%	64.6%
Mother postnatal visit within 6 days rate	60.0%	60.0%	59.0%	60.0%	59.6%
Infant 1st PCR test positive around 10 weeks rate	1.4%	1.4%	1.5%	1.4%	1.0%
Immunisation under 1 year coverage (annualised)	85.0%	82.0%	77.5%	82.0%	74.0%
Measles 2nd dose coverage (annualised)	85.0%	85.0%	84.4%	85.0%	87.7%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	0.5%	0.5%	0%	0.5%	0%
Child under 5 years diarrhoea case fatality rate	5.0%	5.0%	3.1%	5.0%	4.2%
Child under 5 years pneumonia case fatality rate	3.8%	3.8%	2.4%	3.8%	3.2%
Child under 5 years severe acute malnutrition case fatality rate	8.0%	10.0%	11.0%	9.5%	11.7%
School Grade 1 screening coverage (annualised)	10.0%	5.0%	14.5%	7.0%	6.6%
School Grade 8 screening coverage (annualised)	10.0%	5.0%	11.5%	7.0%	4.5%
Couple year protection rate (annualised)	55.0%	-	0%	-	0%
Cervical cancer screening coverage (annualised)	60.0%	25.0%	57.5%	25.0%	63.1%
Vitamin A 12-59 months coverage (annualised)	61.0%	61.0%	63.7%	61.0%	62.0%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	50.0%	25.0%	24.2%	25.0%	33.1%
Disease Prevention and Control					
Clients screened for hypertension	800 000	200 000	825 870	200 000	890 696
Clients screened for diabetes	800 000	200 000	717 515	200 000	817 903
Client screened for Mental Health	160 000	40 000	165 844	40 000	235 217
Cataract Surgery Rate annualised	-	-	-	-	-
Malaria case fatality rate	-	-	0%	-	0%
Programme 3: Emergency Medical Services (EMS)					
EMS P1 urban response under 15 minutes rate	68.0%	68.0%	43.7%	68.0%	38.2%
EMS P1 rural response under 40 minutes rate	68.0%	68.0%	62.2%	68.0%	53.3%
EMS inter-facility transfer rate	70.0%	70.0%	34.2%	70.0%	35.2%

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QUARTERLY OUTPUTS					
Programme 4: Provincial Hospital Services					
Regional Hospitals					
National Core Standards self assessment rate (Regional Hospitals)	80.0%	25.0%	0%	25.0%	100.0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	25.0%	0%	25.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	75.0%	-	0%	25.0%	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	80.0%	25.0%	0%	25.0%	0%
Average Length of Stay (Regional Hospitals)	4.6 days	4.6 days	5.8 days	4.6 days	5.6 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	75.0%	75.0%	67.3%	75.0%	66.6%
Expenditure per PDE (Regional Hospitals)	R 2 243	R 2 243	R 1 740	R 2 243	R 1 292
Complaints resolution rate (Regional Hospitals)	80.0%	80.0%	94.3%	80.0%	90.8%
Complaint Resolution within 25 working days rate (Regional Hospitals)	80.0%	80.0%	94.6%	80.0%	100.0%
Specialised Hospitals					
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	36.0%	50.0%	27.0%	70.0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	36.0%	100.0%	27.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Spec	45.3%	20.0%	60.0%	40.0%	57.1%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	36.0%	0%	27.0%	70.0%
Complaints resolution rate (Specialised Hospitals)	80.0%	80.0%	100.0%	80.0%	95.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	100.0%	100.0%	100.0%	100.0%	94.7%
Programme 5: Central Hospital Services (C&THS)					
Provincial Tertiary Hospitals Services					
National Core Standards self assessment rate (Tertiary Hospitals)	80.0%	100.0%	50.0%	-	0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	80.0%	-	0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	50.0%	-	0%	-	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	80.0%	80.0%	0%	80.0%	0%
Average Length of Stay (Tertiary Hospitals)	5.5 days	5.5 days	5.7 days	5.5 days	5.9 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	75.0%	75.0%	112.8%	75.0%	77.7%
Expenditure per PDE (Tertiary Hospitals)	R 2 843	R 2 843	R 4 413	R 2 843	R 4 695
Complaints resolution rate (Tertiary Hospitals)	90.0%	90.0%	100.0%	90.0%	85.7%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	80.0%	80.0%	96.7%	80.0%	100.0%
Provincial Central Hospitals Services					
National Core Standards self assessment rate (Central Hospitals)	100.0%	100.0%	0%	100.0%	100.0%
Quality improvement plan after self assessment rate (Central Hospitals)	100.0%	100.0%	0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	50.0%	80.0%	0%	80.0%	0%
Patient Satisfaction Survey Rate (Central Hospitals)	80.0%	80.0%	0%	80.0%	0%
Average Length of Stay (Central Hospitals)	5.5 days	5.5 days	11.0 days	5.5 days	11.9 days
Inpatient Bed Utilisation Rate (Central Hospitals)	75.0%	75.0%	84.3%	75.0%	91.2%
Expenditure per PDE (Central Hospitals)	R 2 843	R 3 266	R 4 539	R 3 266	R 4 375
Complaints resolution rate (Central Hospitals)	85.0%	85.0%	99.1%	85.0%	100.0%
Complaint Resolution within 25 working days rate (Central Hospitals)	80.0%	80.0%	100.0%	80.0%	100.0%

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

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

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FREE STATE

Sector: Health

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QUARTERLY OUTPUTS					
Programme 1: Administration					
Percentage of Hospitals with broadband access	25.0%	-	0%	-	0%
Percentage of fixed PHC facilities with broadband access	14.0%	-	0%	-	0%
Programme 2: District Health Services					
District Management					
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	65.0%	17.0%	27.0%	33.0%	29.0%
Client Satisfaction Survey Rate (PHC)	85.0%	16.0%	17.7%	34.0%	18.2%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	5	5	5	-	5
PHC utilisation rate	3.2	3.2	2.3	3.2	2.3
Complaints resolution rate (PHC)	85.0%	85.0%	79.9%	85.0%	85.0%
Complaint resolution within 25 working days rate (PHC)	85.0%	85.0%	99.0%	85.0%	93.2%
District Hospitals					
National Core Standards self assessment rate (District Hospitals)	100.0%	25.0%	16.7%	25.0%	25.0%
Quality improvement plan after self assessment rate (District Hospitals)	100.0%	100.0%	100.0%	100.0%	33.3%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	-	-	0%	-	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	25.0%	83.3%	25.0%	79.2%
Average Length of Stay (District Hospitals)	300.0%	300.0%	3.4 days	300.0%	3.4 days
Inpatient Bed Utilisation Rate (District Hospitals)	75.0%	75.0%	60.2%	75.0%	62.4%
Expenditure per PDE (District Hospitals)	R 2 300	R 2 300	R 2 408	R 2 300	R 2 499
Complaints resolution rate (District Hospitals)	85.0%	85.0%	86.7%	85.0%	75.8%
Complaint Resolution within 25 working days rate (District Hospitals)	85.0%	85.0%	97.6%	85.0%	100.0%
HIV and AIDS, STI and TB (HAST)					
Adults remaining on ART – Total	237 953	193 876	193 260	208 568	193 927
Total Children (under 15 years) remaining on ART – Total	12 878	12 216	9 868	12 436	9 967
TB/HIV co-infected client on ART rate	85.0%	85.0%	90.3%	85.0%	86.2%
Client tested for HIV (incl ANC)	652 059	163 015	161 344	163 015	179 043
TB symptom 5yrs and older screened rate	70.0%	70.0%	65.0%	70.0%	67.1%
Male condom distribution Coverage	50	50	40	50	37
Medical male circumcision performed - Total	40 997	8 199	13 697	12 299	13 662
TB client treatment success rate	85.0%	85.0%	84.3%	85.0%	80.5%
TB client lost to follow up rate	5.0%	5.0%	4.9%	5.0%	5.6%
Maternal, Child and Women's Health and Nutrition (MCWH&N)					
Antenatal 1st visit before 20 weeks rate	65.0%	65.0%	65.7%	65.0%	67.0%
Mother postnatal visit within 6 days rate	85.0%	85.0%	71.2%	85.0%	75.4%
Infant 1st PCR test positive around 10 weeks rate	<2%	<2%	1.3%	<2%	1.4%
Immunisation under 1 year coverage (annualised)	95.0%	95.0%	76.2%	95.0%	70.3%
Measles 2nd dose coverage (annualised)	87.0%	87.0%	101.1%	87.0%	106.7%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	5.5%	5.5%	13.3%	5.5%	11.3%
Child under 5 years diarrhoea case fatality rate	<3%	<3%	6.9%	<3%	1.5%
Child under 5 years pneumonia case fatality rate	<3%	<3%	2.5%	<3%	4.1%
Child under 5 years severe acute malnutrition case fatality rate	11.0%	11.0%	12.1%	11.0%	8.8%
School Grade 1 screening coverage (annualised)	50.0%	50.0%	61.5%	50.0%	9.6%
School Grade 8 screening coverage (annualised)	45.0%	45.0%	26.7%	45.0%	20.2%
Couple year protection rate (annualised)	60.0%	60.0%	47.0%	60.0%	46.1%
Cervical cancer screening coverage (annualised)	60.0%	60.0%	54.7%	60.0%	61.1%
Vitamin A 12-59 months coverage (annualised)	65.0%	65.0%	45.3%	65.0%	46.6%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	87.0%	87.0%	37.4%	87.0%	46.9%
Disease Prevention and Control					
Clients screened for hypertension	700 000	175 000	325 326	175 000	369 638
Clients screened for diabetes	700 000	175 000	228 955	175 000	295 938
Client screened for Mental Health	632 558	158 139	357 713	158 139	436 256
Cataract Surgery Rate annualised	1 500.0	1 500.0	735.3	1 500.0	1 618.7
Malaria case fatality rate	-	-	0%	-	0%
Programme 3: Emergency Medical Services (EMS)					
EMS P1 urban response under 15 minutes rate	55.0%	55.0%	53.9%	55.0%	57.2%
EMS P1 rural response under 40 minutes rate	71.0%	71.0%	72.6%	71.0%	72.8%
EMS inter-facility transfer rate	10.0%	10.0%	26.0%	10.0%	24.6%

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FREE STATE

Sector: Health

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QUARTERLY OUTPUTS					
Programme 4: Provincial Hospital Services					
Regional Hospitals					
National Core Standards self assessment rate (Regional Hospitals)	100.0%	25.0%	0%	25.0%	25.0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	100.0%	0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Regional Hospitals)	-	-	0%	-	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	100.0%	100.0%	100.0%	100.0%
Average Length of Stay (Regional Hospitals)	5.0 days	5.0 days	5.3 days	5.0 days	5.3 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	75.0%	75.0%	59.6%	75.0%	56.2%
Expenditure per PDE (Regional Hospitals)	R 2 600	R 2 600	R 2 655	R 2 600	R 3 121
Complaints resolution rate (Regional Hospitals)	85.0%	85.0%	92.9%	85.0%	82.0%
Complaint Resolution within 25 working days rate (Regional Hospitals)	85.0%	85.0%	100.0%	85.0%	100.0%
Specialised Hospitals					
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	-	100.0%	-	0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	-	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	-	-	0%	-	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	100.0%	100.0%	100.0%	100.0%
Complaints resolution rate (Specialised Hospitals)	85.0%	85.0%	100.0%	85.0%	100.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	85.0%	85.0%	100.0%	85.0%	100.0%
Programme 5: Central Hospital Services (C&THS)					
Provincial Tertiary Hospitals Services					
National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	-	0%	-	0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	-	0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Tertiary Hospitals)	-	-	0%	-	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100.0%	100.0%	100.0%	100.0%	100.0%
Average Length of Stay (Tertiary Hospitals)	7.5 days	7.5 days	5.8 days	7.5 days	5.6 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	80.0%	80.0%	78.6%	80.0%	78.3%
Expenditure per PDE (Tertiary Hospitals)	R 3 000	R 3 000	R 2 993	R 3 000	R 3 759
Complaints resolution rate (Tertiary Hospitals)	85.0%	85.0%	66.7%	85.0%	50.0%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	85.0%	85.0%	100.0%	85.0%	100.0%
Provincial Central Hospitals Services					
National Core Standards self assessment rate (Central Hospitals)	100.0%	-	0%	100.0%	100.0%
Quality improvement plan after self assessment rate (Central Hospitals)	100.0%	-	0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Central Hospitals)	-	-	0%	-	0%
Patient Satisfaction Survey Rate (Central Hospitals)	100.0%	100.0%	100.0%	100.0%	100.0%
Average Length of Stay (Central Hospitals)	7.5 days	7.5 days	7.9 days	7.5 days	8.0 days
Inpatient Bed Utilisation Rate (Central Hospitals)	78.0%	78.0%	70.6%	78.0%	67.2%
Expenditure per PDE (Central Hospitals)	R 5 500	R 5 500	R 5 511	R 5 500	R 7 620
Complaints resolution rate (Central Hospitals)	85.0%	85.0%	100.0%	85.0%	100.0%
Complaint Resolution within 25 working days rate (Central Hospitals)	85.0%	85.0%	100.0%	85.0%	100.0%

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

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

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GAUTENG

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 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 Preliminary output
QUARTERLY OUTPUTS					
Programme 1: Administration					
Percentage of Hospitals with broadband access	100%(36/36)	100.0%	97.1%	100.0%	97.1%
Percentage of fixed PHC facilities with broadband access	27%(100/372)	27%(100)	20.2%	27%(100)	39.2%
Programme 2: District Health Services					
District Management					
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	100%372/272	100.0%	64.2%	100.0%	64.2%
Client Satisfaction Survey Rate (PHC)	100%372/372	100.0%	0%	100.0%	1.3%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	5 of 5	5	5	5	5
PHC utilisation rate	2.8	2.8	1.6	2.8	1.7
Complaints resolution rate (PHC)	95.0%	95.0%	88.1%	95.0%	89.0%
Complaint resolution within 25 working days rate (PHC)	82.0%	82.0%	97.3%	82.0%	97.2%
District Hospitals					
National Core Standards self assessment rate (District Hospitals)	100%(11 of 11)	100%(11 of 11)	9.1%	100.0%	72.7%
Quality improvement plan after self assessment rate (District Hospitals)	85%(9 of 11)	85%(9 of 11)	9.1%	85%(9 of 11)	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	20%(2 of 11)	20%(2 of 11)	0%	20%(2 of 11)	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	100%(11 of 11)	0%	100.0%	100.0%
Average Length of Stay (District Hospitals)	450.0%	-	4.5 days	450.0%	4.4 days
Inpatient Bed Utilisation Rate (District Hospitals)	80.0%	-	69.0%	80.0%	70.1%
Expenditure per PDE (District Hospitals)	R 2650	R 2650	R 2 960	R 2650	R 2 982
Complaints resolution rate (District Hospitals)	85.0%	85.0%	81.5%	85.0%	86.2%
Complaint Resolution within 25 working days rate (District Hospitals)	85.0%	85.0%	99.2%	85.0%	98.8%
HIV and AIDS, STI and TB (HAST)					
Adults remaining on ART – Total	829 643	767 419	730 757	788 160	723 454
Total Children (under 15 years) remaining on ART – Total	38 521	32 150	28 170	34 274	27 691
TB/HIV co-infected client on ART rate	85.0%	21.0%	91.3%	42.0%	76.2%
Client tested for HIV (incl ANC)	3592 943	2488 165	692 498	2856 424	762 675
TB symptom 5yrs and older screened rate	5M	1.5 M	60.9%	3M	63.7%
Male condom distribution Coverage	210960 993	52740 248	33	105480 497	345
Medical male circumcision performed - Total	209 190	72 297	45 270	144 594	31 824
TB client treatment success rate	90.0%	90.0%	88.1%	90.0%	86.8%
TB client lost to follow up rate	5.1%	5.1%	4.9%	5.1%	5.8%
Maternal, Child and Women's Health and Nutrition (MCWH&N)					
Antenatal 1st visit before 20 weeks rate	60.0%	60.0%	57.5%	60.0%	59.1%
Mother postnatal visit within 6 days rate	90.0%	90.0%	82.2%	90.0%	86.5%
Infant 1st PCR test positive around 10 weeks rate	<1.5%	<1.5%	2.7%	<1.5%	1.8%
Immunisation under 1 year coverage (annualised)	92.0%	92.0%	93.3%	92.0%	96.3%
Measles 2nd dose coverage (annualised)	95.0%	95.0%	98.7%	95.0%	124.0%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	<10%	<10%	0.5%	<10%	32.1%
Child under 5 years diarrhoea case fatality rate	2.5%	2.5%	2.4%	2.5%	1.2%
Child under 5 years pneumonia case fatality rate	<2%	<2%	0.7%	<2%	1.7%
Child under 5 years severe acute malnutrition case fatality rate	<10%	<10%	7.5%	<10%	6.9%
School Grade 1 screening coverage (annualised)	40.0%	20.0%	57.0%	25.0%	28.0%
School Grade 8 screening coverage (annualised)	15.0%	5.0%	45.0%	7.0%	21.1%
Couple year protection rate (annualised)	60.0%	60.0%	38.3%	60.0%	39.0%
Cervical cancer screening coverage (annualised)	60.0%	60.0%	44.6%	60.0%	52.9%
Vitamin A 12-59 months coverage (annualised)	60.0%	60.0%	63.6%	60.0%	61.7%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	60.0%	60.0%	36.0%	60.0%	44.0%
Disease Prevention and Control					
Clients screened for hypertension	474 000	119 500	1989 489	239 000	2291 898
Clients screened for diabetes	400 000	100 000	1387 416	200 000	1719 887
Client screened for Mental Health	1	1	800 079	1	1132 689
Cataract Surgery Rate annualised	1300/Mil	1500/Mil	-	1500/Mil	-
Malaria case fatality rate	1.7%	-	1.8%	-	1.3%
Programme 3: Emergency Medical Services (EMS)					
EMS P1 urban response under 15 minutes rate	99%(19822/19962)	99.0%	59.3%	99.0%	56.5%
EMS P1 rural response under 40 minutes rate	100%(304/304)	100.0%	92.9%	100.0%	93.8%
EMS inter-facility transfer rate	13%(110342/799683)	10.5%	31.2%	11.0%	29.3%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 2nd Quarter

GAUTENG

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 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 Preliminary output
QUARTERLY OUTPUTS					
Programme 4: Provincial Hospital Services					
Regional Hospitals					
National Core Standards self assessment rate (Regional Hospitals)	100%(9/9)	100.0%	22.2%	100.0%	55.6%
Quality improvement plan after self assessment rate (Regional Hospitals)	40%(3/9)	40.0%	0%	40.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	33%(3/9)	33.0%	0%	33.0%	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100%(9/9)	100.0%	0%	100.0%	100.0%
Average Length of Stay (Regional Hospitals)	4.9 days	4.9 days	5.0 days	4.9 days	5.2 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	82%(300/400)	82.0%	81.2%	82.0%	85.6%
Expenditure per PDE (Regional Hospitals)	R 3000	R 3000	R 2 653	R 3000	R 2 204
Complaints resolution rate (Regional Hospitals)	88.0%	88.0%	93.7%	88.0%	99.4%
Complaint Resolution within 25 working days rate (Regional Hospitals)	82.0%	82.0%	99.0%	82.0%	100.0%
Specialised Hospitals					
National Core Standards self assessment rate (Specialised Hospitals)	100%(9/9)	100%(9/9)	0%	100.0%	0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	40%(3/9)	40.0%	0%	40.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Spec	41%(3/9)	41.0%	0%	41.0%	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	100.0%	0%	100.0%	100.0%
Complaints resolution rate (Specialised Hospitals)	88.0%	88.0%	78.3%	88.0%	100.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	82.0%	82.0%	100.0%	82.0%	91.7%
Programme 5: Central Hospital Services (C&THS)					
Provincial Tertiary Hospitals Services					
National Core Standards self assessment rate (Tertiary Hospitals)	100%(3/3)	100.0%	33.3%	100.0%	33.3%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100%(3/3)	100.0%	0%	100.0%	33.3%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100%(3/3)	100.0%	0%	100.0%	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100%(3/3)	100.0%	0%	100.0%	100.0%
Average Length of Stay (Tertiary Hospitals)	5.5 days	5.5 days	6.2 days	5.5 days	6.1 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	82.0%	82.0%	86.0%	82.0%	87.4%
Expenditure per PDE (Tertiary Hospitals)	R 2760	R 2760	R 3 027	R 2760	R 3 004
Complaints resolution rate (Tertiary Hospitals)	95.0%	95.0%	84.7%	95.0%	86.5%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	80.0%	80.0%	95.7%	80.0%	98.4%
Provincial Central Hospitals Services					
National Core Standards self assessment rate (Central Hospitals)	100%(4/4)	100.0%	50.0%	100.0%	50.0%
Quality improvement plan after self assessment rate (Central Hospitals)	100%(4/4)	100.0%	0%	100.0%	25.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100%(4/4)	100.0%	0%	100.0%	0%
Patient Satisfaction Survey Rate (Central Hospitals)	100%(4/4)	100.0%	0%	100.0%	100.0%
Average Length of Stay (Central Hospitals)	5.6 days	5.6 days	8.0 days	5.6 days	8.0 days
Inpatient Bed Utilisation Rate (Central Hospitals)	78.0%	78.0%	78.5%	78.0%	81.4%
Expenditure per PDE (Central Hospitals)	R 3 500	R 3 500	R 4 474	R 3 500	R 4 056
Complaints resolution rate (Central Hospitals)	80.0%	80.0%	83.7%	80.0%	78.8%
Complaint Resolution within 25 working days rate (Central Hospitals)	90.0%	90.0%	97.9%	90.0%	95.3%

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

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

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 2nd Quarter
KWAZULU-NATAL

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 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 Preliminary output
QUARTERLY OUTPUTS					
Programme 1: Administration					
Percentage of Hospitals with broadband access	50.0%	45.0%	47.1%	46.0%	47.1%
Percentage of fixed PHC facilities with broadband access	50.0%	45.0%	4.7%	47.0%	19.7%
Programme 2: District Health Services					
District Management					
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	40.0%	15.0%	24.6%	20.0%	40.4%
Client Satisfaction Survey Rate (PHC)	100.0%	25.0%	38.5%	50.0%	32.0%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	2	-	-	-	-
PHC utilisation rate	3.0	3.0	2.8	3.0	2.7
Complaints resolution rate (PHC)	85.0%	80.0%	84.9%	80.0%	86.2%
Complaint resolution within 25 working days rate (PHC)	95.0%	94.5%	94.7%	95.0%	92.7%
District Hospitals					
National Core Standards self assessment rate (District Hospitals)	100.0%	25.0%	42.1%	50.0%	21.1%
Quality improvement plan after self assessment rate (District Hospitals)	100.0%	25.0%	56.3%	50.0%	75.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	21.0%	5.0%	25.0%	10.0%	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	25.0%	73.7%	50.0%	52.6%
Average Length of Stay (District Hospitals)	600.0%	630.0%	5.5 days	620.0%	5.6 days
Inpatient Bed Utilisation Rate (District Hospitals)	65.8%	63.0%	58.4%	64.0%	60.4%
Expenditure per PDE (District Hospitals)	R 1 947	R 2 000	R 2 229	R 1 967	R 2 215
Complaints resolution rate (District Hospitals)	80.0%	75.0%	86.5%	77.0%	73.2%
Complaint Resolution within 25 working days rate (District Hospitals)	95.0%	92.0%	92.1%	93.0%	93.9%
HIV and AIDS, STI and TB (HAST)					
Adults remaining on ART – Total	1205 438	1027 525	1025 723	1086 829	1036 536
Total Children (under 15 years) remaining on ART – Total	68 286	60 153	53 668	62 864	53 717
TB/HIV co-infected client on ART rate	90.0%	85.0%	86.3%	87.0%	88.5%
Client tested for HIV (incl ANC)	2659 268	664 817	690 985	1329 634	761 220
TB symptom 5yrs and older screened rate	35.0%	9.0%	69.3%	18.0%	74.4%
Male condom distribution Coverage	62	50	49	54	54
Medical male circumcision performed - Total	793 528	652 814	33 850	699 718	34 581
TB client treatment success rate	86.0%	86.0%	86.3%	86.0%	88.6%
TB client lost to follow up rate	3.4%	3.8%	4.0%	3.6%	3.7%
Maternal, Child and Women's Health and Nutrition (MCWH&N)					
Antenatal 1st visit before 20 weeks rate	62.6%	62.0%	67.2%	62.3%	70.0%
Mother postnatal visit within 6 days rate	82.0%	73.0%	62.3%	76.0%	65.3%
Infant 1st PCR test positive around 10 weeks rate	<1%	<1%	1.6%	<1%	1.4%
Immunisation under 1 year coverage (annualised)	92.0%	90.0%	80.8%	90.1%	85.6%
Measles 2nd dose coverage (annualised)	90.0%	88.5%	97.9%	89.0%	102.6%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	6.0%	7.1%	32.2%	6.8%	14.2%
Child under 5 years diarrhoea case fatality rate	2.8%	2.9%	2.2%	2.9%	1.7%
Child under 5 years pneumonia case fatality rate	3.0%	3.2%	2.1%	3.1%	2.3%
Child under 5 years severe acute malnutrition case fatality rate	8.0%	8.7%	6.2%	8.4%	9.3%
School Grade 1 screening coverage (annualised)	25.0%	6.5%	55.1%	13.0%	13.5%
School Grade 8 screening coverage (annualised)	20.0%	5.0%	40.0%	10.0%	6.5%
Couple year protection rate (annualised)	60.0%	50.0%	49.5%	53.0%	52.9%
Cervical cancer screening coverage (annualised)	75.0%	73.4%	75.5%	74.0%	89.7%
Vitamin A 12-59 months coverage (annualised)	65.0%	65.0%	64.3%	65.0%	63.2%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	55.0%	52.0%	54.2%	53.0%	54.1%
Disease Prevention and Control					
Clients screened for hypertension	7980 052	1995 013	2480 126	3990 026	2617 274
Clients screened for diabetes	5127 276	1281 819	2305 898	2563 638	2529 186
Client screened for Mental Health	100 000	25 000	1162 508	50 000	1465 238
Cataract Surgery Rate annualised	1154/1mil	683/1mil	510.6	809/1mil	402.7
Malaria case fatality rate	<0.5%	<0.5%	2.1%	<0.5%	0%
Programme 3: Emergency Medical Services (EMS)					
EMS P1 urban response under 15 minutes rate	6.0%	5.0%	4.4%	5.0%	4.5%
EMS P1 rural response under 40 minutes rate	34.0%	33.0%	34.4%	33.0%	35.1%
EMS inter-facility transfer rate	40.0%	41.0%	31.0%	40.0%	31.6%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 2nd Quarter
KWAZULU-NATAL

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 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 Preliminary output
QUARTERLY OUTPUTS					
Programme 4: Provincial Hospital Services					
Regional Hospitals					
National Core Standards self assessment rate (Regional Hospitals)	100.0%	25.0%	76.9%	50.0%	7.7%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	25.0%	50.0%	50.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	25.0%	-	30.0%	-	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	25.0%	76.9%	50.0%	53.8%
Average Length of Stay (Regional Hospitals)	6.5 days	6.3 days	6.1 days	6.3 days	6.4 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	70.5%	67.6%	73.9%	68.0%	69.9%
Expenditure per PDE (Regional Hospitals)	R 2 822	R 2 822	R 3 031	R 2 822	R 3 174
Complaints resolution rate (Regional Hospitals)	86.0%	83.0%	75.1%	83.5%	67.8%
Complaint Resolution within 25 working days rate (Regional Hospitals)	97.5%	97.2%	97.9%	97.3%	94.5%
Specialised Hospitals					
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	25.0%	36.8%	50.0%	21.1%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	25.0%	14.3%	50.0%	50.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	22.0%	-	0%	-	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	25.0%	47.4%	50.0%	21.1%
Complaints resolution rate (Specialised Hospitals)	83.2%	82.0%	46.8%	82.5%	43.1%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	94.4%	94.4%	82.4%	94.4%	94.3%
Programme 5: Central Hospital Services (C&THS)					
Provincial Tertiary Hospitals Services					
National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	-	33.3%	-	33.3%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	-	0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	33.0%	-	0%	-	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100.0%	-	100.0%	-	66.7%
Average Length of Stay (Tertiary Hospitals)	7.7 days	7.7 days	8.0 days	7.7 days	7.8 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	78.9%	77.0%	76.7%	77.5%	77.2%
Expenditure per PDE (Tertiary Hospitals)	R 2 894	R 2 894	R 3 203	R 2 894	R 3 412
Complaints resolution rate (Tertiary Hospitals)	85.0%	84.0%	66.0%	84.5%	80.6%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	100.0%	100.0%	93.9%	100.0%	100.0%
Provincial Central Hospitals Services					
National Core Standards self assessment rate (Central Hospitals)	100.0%	-	100.0%	-	100.0%
Quality improvement plan after self assessment rate (Central Hospitals)	100.0%	-	0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	-	0%	-	0%
Patient Satisfaction Survey Rate (Central Hospitals)	100.0%	-	0%	-	0%
Average Length of Stay (Central Hospitals)	8.5 days	8.6 days	8.8 days	8.6 days	8.7 days
Inpatient Bed Utilisation Rate (Central Hospitals)	67.1%	67.1%	66.0%	67.1%	66.9%
Expenditure per PDE (Central Hospitals)	R 8 173	R 8 100	R 9 493	R 8 150	R 9 246
Complaints resolution rate (Central Hospitals)	80.0%	75.0%	90.5%	76.0%	72.2%
Complaint Resolution within 25 working days rate (Central Hospitals)	96.5%	95.5%	100.0%	96.5%	100.0%

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

Mrs. P.D. Khumalo Acting Director General: Office of the Premier Kwazulu Natal

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 2nd Quarter

MPUMALANGA

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 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 Preliminary output
QUARTERLY OUTPUTS					
Programme 1: Administration					
Percentage of Hospitals with broadband access	100.0%	100.0%	100.0%	100.0%	100.0%
Percentage of fixed PHC facilities with broadband access	80.0%	35.0%	35.8%	53.0%	35.8%
Programme 2: District Health Services					
District Management					
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	80.0%	35.0%	0%	53.0%	0%
Client Satisfaction Survey Rate (PHC)	100.0%	-	0%	-	0%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	1	-	-	-	-
PHC utilisation rate	2.5	2.5	2.2	2.5	2.2
Complaints resolution rate (PHC)	86.0%	86.0%	54.3%	86.0%	71.9%
Complaint resolution within 25 working days rate (PHC)	90.0%	90.0%	96.0%	90.0%	91.7%
District Hospitals					
National Core Standards self assessment rate (District Hospitals)	100.0%	-	0%	-	0%
Quality improvement plan after self assessment rate (District Hospitals)	100.0%	-	0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	30.0%	-	0%	-	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	-	0%	-	0%
Average Length of Stay (District Hospitals)	370.0%	370.0%	4.6 days	370.0%	4.5 days
Inpatient Bed Utilisation Rate (District Hospitals)	75.0%	74.0%	23.9%	74.0%	35.9%
Expenditure per PDE (District Hospitals)	R 2 114	R 2 114	R 2 346	R 2 114	R 3 728
Complaints resolution rate (District Hospitals)	90.0%	90.0%	66.2%	90.0%	72.1%
Complaint Resolution within 25 working days rate (District Hospitals)	96.0%	96.0%	97.1%	96.0%	96.5%
HIV and AIDS, STI and TB (HAST)					
Adults remaining on ART – Total	372 014	339 747	316 624	350 185	324 724
Total Children (under 15 years) remaining on ART – Total	28 001	25 572	16 677	26 358	16 661
TB/HIV co-infected client on ART rate	100.0%	100.0%	36.7%	100.0%	37.4%
Client tested for HIV (incl ANC)	1074 568	288 642	265 369	268 642	256 394
TB symptom 5yrs and older screened rate	90.0%	90.0%	24.6%	90.0%	33.8%
Male condom distribution Coverage	50	50	359	50	539
Medical male circumcision performed - Total	85 084	26 000	14 590	30 000	12 146
TB client treatment success rate	>85%	>85%	86.4%	>85%	86.7%
TB client lost to follow up rate	<5%	<5%	3.9%	<5%	4.7%
Maternal, Child and Women's Health and Nutrition (MCWH&N)					
Antenatal 1st visit before 20 weeks rate	70.0%	70.0%	69.5%	70.0%	73.5%
Mother postnatal visit within 6 days rate	70.0%	70.0%	58.8%	70.0%	58.2%
Infant 1st PCR test positive around 10 weeks rate	<1.6%	<1.6%	1.9%	<1.6%	4.7%
Immunisation under 1 year coverage (annualised)	90.0%	90.0%	79.8%	90.0%	75.4%
Measles 2nd dose coverage (annualised)	90.0%	90.0%	87.8%	90.0%	90.1%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	<10%	<10%	31.3%	<10%	15.1%
Child under 5 years diarrhoea case fatality rate	4.0%	4.0%	3.2%	4.0%	1.5%
Child under 5 years pneumonia case fatality rate	3.6%	360.0%	3.3%	3.6%	4.8%
Child under 5 years severe acute malnutrition case fatality rate	15.0%	15.0%	7.6%	15.0%	11.1%
School Grade 1 screening coverage (annualised)	28.0%	28.0%	26.2%	28.0%	11.5%
School Grade 8 screening coverage (annualised)	15.0%	15.0%	9.3%	15.0%	7.5%
Couple year protection rate (annualised)	45.0%	45.0%	70.6%	45.0%	97.5%
Cervical cancer screening coverage (annualised)	70.0%	70.0%	64.6%	70.0%	75.0%
Vitamin A 12-59 months coverage (annualised)	55.0%	55.0%	47.4%	55.0%	41.9%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	55.0%	55.0%	33.1%	55.0%	36.6%
Disease Prevention and Control					
Clients screened for hypertension	100 000	15 000	607 551	35 000	728 889
Clients screened for diabetes	80 000	20 000	275 410	20 000	400 947
Client screened for Mental Health	1	1	103 864	1	190 931
Cataract Surgery Rate annualised	3 600.0	600.0	1 611.2	1 200.0	2 450.3
Malaria case fatality rate	0.5%	0.5%	0.2%	0.5%	0.8%
Programme 3: Emergency Medical Services (EMS)					
EMS P1 urban response under 15 minutes rate	85.0%	85.0%	75.5%	85.0%	71.1%
EMS P1 rural response under 40 minutes rate	75.0%	75.0%	74.7%	75.0%	65.9%
EMS inter-facility transfer rate	30.0%	30.0%	3.7%	30.0%	5.9%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 2nd Quarter

MPUMALANGA

Sector: Health

Programme / Subprogramme / Performance Measures

Target for
2016/17 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
Preliminary
output

QUARTERLY OUTPUTS

Programme 4: Provincial Hospital Services

Regional Hospitals

National Core Standards self assessment rate (Regional Hospitals)	100.0%	-	0%	-	0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	-	0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	-	0%	-	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	-	0%	-	0%
Average Length of Stay (Regional Hospitals)	4.7 days	4.7 days	4.3 days	4.7 days	4.7 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	75.0%	75.0%	25.2%	75.0%	40.4%
Expenditure per PDE (Regional Hospitals)	R 2 722	R 2 722	R 3 198	R 2 722	R 3 050
Complaints resolution rate (Regional Hospitals)	90.0%	90.0%	77.2%	90.0%	71.0%
Complaint Resolution within 25 working days rate (Regional Hospitals)	90.0%	90.0%	93.2%	90.0%	100.0%

Specialised Hospitals

National Core Standards self assessment rate (Specialised Hospitals)	100.0%	100.0%	0%	100.0%	0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	90.0%	90.0%	0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	90.0%	90.0%	0%	100.0%	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	100.0%	0%	100.0%	0%
Complaints resolution rate (Specialised Hospitals)	90.0%	90.0%	40.0%	90.0%	100.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	90.0%	90.0%	100.0%	90.0%	100.0%

Programme 5: Central Hospital Services (C&THS)

Provincial Tertiary Hospitals Services

National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	100.0%	0%	100.0%	0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	100.0%	0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	100.0%	0%	100.0%	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100.0%	-	0%	-	0%
Average Length of Stay (Tertiary Hospitals)	5.6 days	5.6 days	7.3 days	5.6 days	7.1 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	75.0%	75.0%	27.0%	75.0%	43.0%
Expenditure per PDE (Tertiary Hospitals)	R 3 414	R 3 414	R 3 013	R 3 414	R 2 892
Complaints resolution rate (Tertiary Hospitals)	90.0%	90.0%	75.9%	90.0%	71.4%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	90.0%	90.0%	100.0%	90.0%	100.0%

Provincial Central Hospitals Services

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

1. Information submitted by: Dr. S. Mohangi Head of Department: Health Mpumalanga: Tel (013) 766 3298

Mr T. Mdakane Director General: Office of the Premier Mpumalanga

*This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 2nd Quarter

NORTH WEST

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 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 Preliminary output
QUARTERLY OUTPUTS					
Programme 1: Administration					
Percentage of Hospitals with broadband access	33.0%	-	0%	20.0%	0%
Percentage of fixed PHC facilities with broadband access	15.0%	-	0%	10.0%	0%
Programme 2: District Health Services					
District Management					
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	40.0%	25.0%	19.6%	30.0%	19.9%
Client Satisfaction Survey Rate (PHC)	75.0%	-	0%	-	0%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	-	-	-	-	-
PHC utilisation rate	2.2	2.2	2.3	2.2	1.7
Complaints resolution rate (PHC)	86.0%	86.0%	92.7%	86.0%	90.8%
Complaint resolution within 25 working days rate (PHC)	85.0%	85.0%	100.4%	85.0%	98.1%
District Hospitals					
National Core Standards self assessment rate (District Hospitals)	100.0%	100.0%	100.0%	-	0%
Quality improvement plan after self assessment rate (District Hospitals)	100.0%	-	0%	100.0%	46.2%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (District Hospitals)	33.0%	-	0%	16.0%	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	-	0%	-	0%
Average Length of Stay (District Hospitals)	2-4 days	2-4 days	4.9 days	2-4 days	4.9 days
Inpatient Bed Utilisation Rate (District Hospitals)	65%-70%	65%-70%	22.6%	65%-70%	42.7%
Expenditure per PDE (District Hospitals)	R2400 - R2500	R2400-R2500	R 2 506	R2400-R2500	R 4 941
Complaints resolution rate (District Hospitals)	85.0%	85.0%	95.2%	85.0%	100.0%
Complaint Resolution within 25 working days rate (District Hospitals)	93.0%	93.0%	99.0%	93.0%	100.0%
HIV and AIDS, STI and TB (HAST)					
Adults remaining on ART – Total	209 931	178 441	200 823	193 136	59 437
Total Children (under 15 years) remaining on ART – Total	13 400	11 390	11 444	12 328	2 645
TB/HIV co-infected client on ART rate	85.0%	85.0%	57.7%	85.0%	61.9%
Client tested for HIV (incl ANC)	843 193	210 798	206 494	21 798	163 170
TB symptom 5yrs and older screened rate	75.0%	75.0%	17.7%	75.0%	31.9%
Male condom distribution Coverage	38	38	35	38	20
Medical male circumcision performed - Total	48 774	12 194	8 111	12 194	10 982
TB client treatment success rate	85.0%	85.0%	84.9%	85.0%	80.3%
TB client lost to follow up rate	5.0%	5.0%	5.5%	5.0%	3.1%
Maternal, Child and Women's Health and Nutrition (MCWH&N)					
Antenatal 1st visit before 20 weeks rate	65.0%	65.0%	64.6%	65.0%	67.5%
Mother postnatal visit within 6 days rate	80.0%	80.0%	73.8%	80.0%	78.7%
Infant 1st PCR test positive around 10 weeks rate	2.0%	2.0%	1.7%	2.0%	2.1%
Immunisation under 1 year coverage (annualised)	90.0%	90.0%	73.8%	90.0%	53.3%
Measles 2nd dose coverage (annualised)	90.0%	90.0%	78.5%	90.0%	60.1%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	5.0%	5.0%	612.5%	5.0%	433.3%
Child under 5 years diarrhoea case fatality rate	3.2%	3.2%	5.7%	3.2%	2.4%
Child under 5 years pneumonia case fatality rate	3.0%	3.0%	2.2%	3.0%	3.6%
Child under 5 years severe acute malnutrition case fatality rate	10.0%	10.0%	15.6%	10.0%	13.4%
School Grade 1 screening coverage (annualised)	50.0%	20.0%	105.9%	10.0%	21.1%
School Grade 8 screening coverage (annualised)	30.0%	10.0%	66.9%	5.0%	38.0%
Couple year protection rate (annualised)	40.0%	40.0%	41.9%	40.0%	26.9%
Cervical cancer screening coverage (annualised)	70.0%	70.0%	61.5%	70.0%	55.7%
Vitamin A 12-59 months coverage (annualised)	55.0%	55.0%	56.0%	55.0%	34.8%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	40.0%	40.0%	34.2%	40.0%	42.6%
Disease Prevention and Control					
Clients screened for hypertension	700 000	180 000	374 496	180 000	300 080
Clients screened for diabetes	415 000	100 000	257 110	125 000	183 306
Client screened for Mental Health	145 000	30 000	113 816	40 000	111 599
Cataract Surgery Rate annualised	600.0	600.0	640.5	600.0	634.8
Malaria case fatality rate	-	-	0%	-	0%
Programme 3: Emergency Medical Services (EMS)					
EMS P1 urban response under 15 minutes rate	50.0%	50.0%	43.5%	50.0%	42.1%
EMS P1 rural response under 40 minutes rate	50.0%	50.0%	50.4%	50.0%	47.1%
EMS inter-facility transfer rate	30.0%	30.0%	33.3%	30.0%	27.9%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 2nd Quarter
 NORTH WEST
 Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 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 Preliminary output
QUARTERLY OUTPUTS					
Programme 4: Provincial Hospital Services					
Regional Hospitals					
National Core Standards self assessment rate (Regional Hospitals)	100.0%	-	0%	100.0%	100.0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	-	0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	66.0%	-	0%	66.0%	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	-	0%	-	0%
Average Length of Stay (Regional Hospitals)	7 days	7 days	5.5 days	7 days	5.8 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	85.0%	85.0%	29.8%	85.0%	42.3%
Expenditure per PDE (Regional Hospitals)	R 2 500	R 2 500	R 2 746	R 2 500	R 5 773
Complaints resolution rate (Regional Hospitals)	75.0%	75.0%	95.6%	75.0%	100.0%
Complaint Resolution within 25 working days rate (Regional Hospitals)	90.0%	90.0%	100.0%	90.0%	100.0%
Specialised Hospitals					
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	-	0%	100.0%	100.0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	-	0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	50.0%	-	0%	50.0%	50.0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	100.0%	0%	100.0%	0%
Complaints resolution rate (Specialised Hospitals)	90.0%	90.0%	100.0%	90.0%	100.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	90.0%	90.0%	100.0%	90.0%	100.0%
Programme 5: Central Hospital Services (C&THS)					
Provincial Tertiary Hospitals Services					
National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	-	0%	100.0%	100.0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	-	0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Tertiary Hospitals)	100.0%	-	0%	100.0%	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100.0%	-	0%	-	0%
Average Length of Stay (Tertiary Hospitals)	7 days	7 days	7.0 days	7 days	6.6 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	83%-88%	83%-88%	25.9%	83%-88%	27.9%
Expenditure per PDE (Tertiary Hospitals)	R 2 600	R 2 600	R 2 644	R 2 600	R 6 497
Complaints resolution rate (Tertiary Hospitals)	80.0%	80.0%	95.0%	80.0%	93.9%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	90.0%	90.0%	100.0%	90.0%	96.1%
Provincial Central Hospitals Services					
National Core Standards self assessment rate (Central Hospitals)	-	-	-	-	-
Quality improvement plan after self assessment rate (Central Hospitals)	-	-	-	-	-
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Central Hospitals)	-	-	-	-	-
Patient Satisfaction Survey Rate (Central Hospitals)	-	-	-	-	-
Average Length of Stay (Central Hospitals)	-	-	-	-	-
Inpatient Bed Utilisation Rate (Central Hospitals)	-	-	-	-	-
Expenditure per PDE (Central Hospitals)	-	-	-	-	-
Complaints resolution rate (Central Hospitals)	-	-	-	-	-
Complaint Resolution within 25 working days rate (Central Hospitals)	-	-	-	-	-

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

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

*This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 2nd Quarter

WESTERN CAPE

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 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 Preliminary output
QUARTERLY OUTPUTS					
Programme 1: Administration					
Percentage of Hospitals with broadband access	46.3%	42.9%	50.0%	42.9%	57.1%
Percentage of fixed PHC facilities with broadband access	25.3%	26.1%	66.7%	26.1%	72.5%
Programme 2: District Health Services					
District Management					
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	14.5%	5.0%	0%	13.6%	0%
Client Satisfaction Survey Rate (PHC)	84.4%	1.1%	4.0%	1.9%	13.1%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	Not applicable in the W Cape	Not applicable in the W Cape	Not applicable in the W Cape	Not applicable in the W Cape	Not applicable in the W Cape
PHC utilisation rate	2.3	2.2	2.3	2.3	2.3
Complaints resolution rate (PHC)	92.4%	91.9%	93.6%	92.8%	97.6%
Complaint resolution within 25 working days rate (PHC)	95.3%	94.8%	97.8%	95.7%	97.9%
District Hospitals					
National Core Standards self assessment rate (District Hospitals)	100.0%	-	14.7%	2.9%	14.7%
Quality improvement plan after self assessment rate (District Hospitals)	97.1%	-	20.0%	-	40.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	8.8%	-	20.0%	-	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	-	0%	5.9%	14.7%
Average Length of Stay (District Hospitals)	3.3 days	3.3 days	3.2 days	330.0%	3.2 days
Inpatient Bed Utilisation Rate (District Hospitals)	90.4%	90.9%	85.3%	90.3%	86.4%
Expenditure per PDE (District Hospitals)	R 2 015	R 2 032	R 1 968	R 2 037	R 2 069
Complaints resolution rate (District Hospitals)	93.2%	92.8%	95.4%	93.3%	93.6%
Complaint Resolution within 25 working days rate (District Hospitals)	92.4%	92.8%	90.1%	93.1%	90.9%
HIV and AIDS, STI and TB (HAST)					
Adults remaining on ART – Total	214 978	185 872	201 432	195 458	204 405
Total Children (under 15 years) remaining on ART – Total	8 521	7 735	8 049	8 008	7 842
TB/HIV co-infected client on ART rate	88.3%	87.5%	89.5%	89.3%	88.2%
Client tested for HIV (incl ANC)	1247 531	290 363	327 902	338 582	336 908
TB symptom 5yrs and older screened rate	14.6%	14.4%	25.1%	14.8%	30.5%
Male condom distribution Coverage	46	44	52	47	50
Medical male circumcision performed - Total	33 741	8 625	2 932	8 607	3 540
TB client treatment success rate	86.0%	85.4%	83.8%	86.9%	83.6%
TB client lost to follow up rate	7.9%	7.1%	9.6%	7.6%	9.3%
Maternal, Child and Women's Health and Nutrition (MCWH&N)					
Antenatal 1st visit before 20 weeks rate	66.9%	66.8%	68.2%	67.0%	69.3%
Mother postnatal visit within 6 days rate	77.4%	76.7%	56.9%	77.6%	56.1%
Infant 1st PCR test positive around 10 weeks rate	1.3%	1.3%	0.7%	1.3%	0.8%
Immunisation under 1 year coverage (annualised)	98.3%	97.7%	89.3%	96.9%	78.3%
Measles 2nd dose coverage (annualised)	79.9%	78.1%	113.3%	80.2%	94.6%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	2.6%	2.6%	54.8%	2.6%	22.3%
Child under 5 years diarrhoea case fatality rate	0.2%	0.1%	0.4%	0.1%	0.2%
Child under 5 years pneumonia case fatality rate	0.3%	0.3%	0.4%	0.3%	0.1%
Child under 5 years severe acute malnutrition case fatality rate	1.7%	1.8%	0%	1.8%	2.1%
School Grade 1 screening coverage (annualised)	41.5%	43.3%	73.0%	46.1%	25.3%
School Grade 8 screening coverage (annualised)	11.1%	10.6%	18.0%	11.8%	10.1%
Couple year protection rate (annualised)	61.1%	62.3%	58.7%	62.0%	61.2%
Cervical cancer screening coverage (annualised)	57.6%	54.8%	52.4%	61.7%	57.7%
Vitamin A 12-59 months coverage (annualised)	48.1%	47.4%	53.6%	48.3%	46.9%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	28.2%	22.5%	31.1%	22.4%	34.6%
Disease Prevention and Control					
Clients screened for hypertension	8 210	2 053	27 983	2 053	81 335
Clients screened for diabetes	41 049	10 262	22 345	10 262	67 790
Client screened for Mental Health	0	0	-	0	-
Cataract Surgery Rate annualised	1 661.0	1 684.0	1 894.5	1 729.0	1 612.5
Malaria case fatality rate	2.3%	1.7%	0%	1.7%	0%
Programme 3: Emergency Medical Services (EMS)					
EMS P1 urban response under 15 minutes rate	67.0%	67.0%	58.7%	67.0%	56.9%
EMS P1 rural response under 40 minutes rate	84.0%	84.0%	78.2%	84.0%	78.6%
EMS inter-facility transfer rate	40.0%	40.0%	40.8%	40.0%	38.5%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 2nd Quarter
WESTERN CAPE
Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 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 Preliminary output
QUARTERLY OUTPUTS					
Programme 4: Provincial Hospital Services					
Regional Hospitals					
National Core Standards self assessment rate (Regional Hospitals)	100.0%	-	0%	-	0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	-	0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	-	0%	-	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	-	0%	-	0%
Average Length of Stay (Regional Hospitals)	3.9 days	3.9 days	4.0 days	3.8 days	3.9 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	84.7%	86.7%	89.6%	84.3%	88.3%
Expenditure per PDE (Regional Hospitals)	R 3 039	R 2 927	R 2 747	R 2 842	R 1 967
Complaints resolution rate (Regional Hospitals)	99.0%	98.9%	100.0%	98.9%	100.0%
Complaint Resolution within 25 working days rate (Regional Hospitals)	98.3%	98.9%	96.3%	98.9%	100.0%
Specialised Hospitals					
National Core Standards self assessment rate (Specialised Hospitals)	90.9%	-	18.2%	-	9.1%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	-	0%	-	200.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Spec	40.0%	-	0%	-	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	-	0%	-	0%
Complaints resolution rate (Specialised Hospitals)	99.5%	98.0%	100.0%	100.0%	100.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	98.4%	98.0%	100.0%	97.8%	94.4%
Programme 5: Central Hospital Services (C&THS)					
Provincial Tertiary Hospitals Services					
National Core Standards self assessment rate (Tertiary Hospitals)	Yes	No	0%	No	0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	Yes	No	0%	No	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	Yes	No	0%	No	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	Yes	No	0%	No	0%
Average Length of Stay (Tertiary Hospitals)	4.0 days	4.0 days	4.0 days	4.1 days	4.2 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	83.0%	83.6%	83.2%	84.3%	80.1%
Expenditure per PDE (Tertiary Hospitals)	R 5 485	R 5 485	R 5 054	R 5 274	R 3 510
Complaints resolution rate (Tertiary Hospitals)	96.0%	95.5%	100.0%	95.5%	100.0%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	83.0%	83.3%	93.5%	83.3%	96.6%
Provincial Central Hospitals Services					
National Core Standards self assessment rate (Central Hospitals)	100.0%	-	0%	-	0%
Quality improvement plan after self assessment rate (Central Hospitals)	100.0%	-	0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	-	0%	-	0%
Patient Satisfaction Survey Rate (Central Hospitals)	100.0%	-	0%	-	0%
Average Length of Stay (Central Hospitals)	6.2 days	6.2 days	6.5 days	6.4 days	6.5 days
Inpatient Bed Utilisation Rate (Central Hospitals)	86.5%	86.9%	87.5%	87.6%	89.8%
Expenditure per PDE (Central Hospitals)	R 4 870	R 4 870	R 4 569	R 4 723	R 4 636
Complaints resolution rate (Central Hospitals)	88.5%	88.6%	98.7%	88.6%	91.6%
Complaint Resolution within 25 working days rate (Central Hospitals)	86.6%	86.6%	91.4%	86.6%	90.0%

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

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