

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter  
EASTERN CAPE  
Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 1: Administration</b>					
Proportion of health facilities connected to the internet	-	-	0%	-	0%
<b>Programme 2: District Health Services</b>					
PHC Utilisation rate	2.8	2.8	2.6	2.8	2.8
OHH registration visit coverage	54.0%	12.0%	145.3%	15.0%	8.8%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	91.0%	91.0%	76.5%	91.0%	78.1%
Complaint resolution within 25 working days rate	80.0%	80.0%	96.2%	80.0%	95.9%
Number of fully fledged District Clinical specialist Teams appointed	3	-	-	-	-
Number of fully-fledged Ward Based Outreach Teams appointed	12	3	15	3	7
School ISHP coverage	10.7%	10.7%	36.5%	10.7%	37.8%
School Grade 1 screening coverage	22.4%	6.4%	18.0%	10.0%	18.9%
School Grade 4 screening coverage	18.1%	6.0%	16.7%	7.1%	28.3%
School Grade 8 screening coverage	14.8%	4.0%	7.3%	5.8%	14.4%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National	49.0%	-	0%	-	0%
Compliance Rate of PHC Facilities (of National Core Standards)	40.0%	40.0%	0%	40.0%	0%
<b>District Hospitals</b>					
Average Length of Stay	4.9 days	4.9 days	5.2 days	4.9 days	5.2 days
Inpatient Bed Utilisation Rate	65.0%	65.0%	57.8%	65.0%	60.9%
Expenditure per patient day equivalent (PDE)	R 1 380	R 1 380	R 1 943	R 1 380	R 2 008
Complaint Resolution within 25 working days rate	90.0%	90.0%	97.3%	90.0%	102.1%
Mental health admission rate	-	-	0%	-	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	68.2%	-	0%	-	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	80.0%	80.0%	0%	80.0%	38.5%
<b>HIV and AIDS, TB and STI control</b>					
Total clients remaining on ART (TROA) at end of the month	387 387	18 750	18 187	18 750	12 542
Number of Medical Male Circumcisions conducted	42 000	16 000	379	2 000	237
TB (new pulmonary) defaulter rate	7.0%	7.0%	7.6%	7.0%	8.2%
TB AFB sputum result turn-around time under 48 hours rate	73.0%	73.0%	57.5%	73.0%	56.6%
TB new client treatment success rate	80.0%	80.0%	77.9%	80.0%	79.4%
HIV testing coverage (15-49 Years - Annualised)	49.0%	45.0%	31.2%	47.0%	33.5%
TB (new pulmonary) cure rate	75.0%	-	0%	-	0%
TB MDR confirmed treatment initiation rate	100.0%	100.0%	100.0%	100.0%	100.0%
<b>Maternal, child and women health</b>					
Immunisation coverage under 1 year	90.0%	90.0%	76.8%	90.0%	78.4%
Vitamin A coverage 12-59 months	55.0%	55.0%	46.1%	55.0%	54.3%
Deworming 12-59 months coverage	50.0%	50.0%	40.1%	50.0%	43.6%
Child under 2 years underweight for age incidence	0.20	0.20	31.61	0.20	20.13
Measles 1st dose under 1 year coverage	95.0%	95.0%	84.4%	95.0%	85.4%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	90.0%	90.0%	81.1%	90.0%	79.7%
Rotavirus (RV) 2nd Dose Coverage	90.0%	90.0%	79.1%	90.0%	85.9%
Cervical cancer screening coverage	42.0%	42.0%	46.1%	42.0%	61.3%
HPV Vaccine Coverage amongst Grade 4 girls	80.0%	80.0%	82.2%	80.0%	92.7%
Antenatal 1st visits before 20 weeks rate	42.0%	42.0%	43.7%	42.0%	48.4%
Infant given NVP within 72 hours after birth uptake rate	100.0%	100.0%	101.8%	100.0%	99.8%
Infant 1st PCR Test positive around 6 weeks rate	2.8%	2.8%	1.8%	2.8%	1.8%
Couple year protection rate	60.0%	-	0%	-	0%
<b>Disease Prevention and Control</b>					
Hypertension incidence	0.04	0.04	24.50	0.04	20.07
Diabetes incidence	0.00	0.00	7.94	0.00	6.46
Cataract surgery rate (Uninsured Population)	1 050.0	262.5	1 094.6	262.5	1 015.9
<b>Programme 3: Emergency Medical Services</b>					
EMS operational ambulance coverage	0.50	0.29	0.73	0.48	0.32
EMS P1 urban response under 15 minutes rate	65.0%	65.0%	38.2%	65.0%	41.3%
EMS P1 rural response under 40 minutes rate	65.0%	65.0%	44.0%	65.0%	51.3%
EMS P1 call response under 60 minutes rate	70.0%	70.0%	65.4%	70.0%	64.6%
<b>Programme 4: Provincial Hospital Services</b>					
<b>General (regional) hospitals</b>					
Average Length of Stay	4.6 days	4.6 days	5.3 days	4.6 days	4.9 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	67.6%	75.0%	69.5%
Expenditure per patient day equivalent (PDE)	R 2 077	R 2 077	R 2 058	R 2 077	R 2 280
Complaint Resolution within 25 working days rate	80.0%	80.0%	100.0%	80.0%	100.0%
Mental health admission rate	-	-	0%	-	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	-	0%	-	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	80.0%	80.0%	0%	80.0%	0%

**QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter**  
**EASTERN CAPE**  
**Sector: Health**

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 5: Central Hospital Services</b>					
<b>Tertiary Hospitals</b>					
Average Length of Stay	5.5 days	5.5 days	6.1 days	5.5 days	5.7 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	74.1%	75.0%	76.9%
Expenditure per patient day equivalent (PDE)	R 1 923	R 1 900	R 2 644	R 1 900	R 3 157
Complaint Resolution within 25 working days rate	80.0%	80.0%	100.0%	80.0%	100.0%
Mental health admission rate	-	-	0%	-	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	-	0%	-	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	80.0%	100.0%	0%	100.0%	0%
<b>Central Hospitals</b>					
Average Length of Stay	5.5 days	5.5 days	7.2 days	5.5 days	7.0 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	91.9%	75.0%	94.1%
Expenditure per patient day equivalent (PDE)	R 1 950	R 1 900	R 0	R 1 900	R 0
Complaint Resolution within 25 working days rate	80.0%	80.0%	100.0%	80.0%	100.0%
Mental health admission rate	-	-	0%	-	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	-	0%	-	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	80.0%	80.0%	0%	80.0%	0%
<b>Programme 8: Health Facilities Management</b>					
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	29.0%	7.3%	14.9%	7.3%	23.6%
Number of districts spending more than 90% of maintenance budget	8	8	8	8	8

1. Information submitted by: Ms. T. Mbengashe Head Official: Health Eastern Cape Tel No (040) 608 1111

Ms. M.T.N. Mbina-Mthembu Head Official: Provincial Treasury Eastern Cape

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter

FREE STATE

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 1: Administration</b>					
Proportion of health facilities connected to the internet	50.0%	0%	0%	0%	0%
<b>Programme 2: District Health Services</b>					
PHC Utilisation rate	3.0	3.0	2.4	3.0	2.5
OHH registration visit coverage	10.9%	10.9%	2.6%	10.9%	2.0%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	85.0%	85.0%	58.5%	85.0%	26.0%
Complaint resolution within 25 working days rate	75.0%	75.0%	92.2%	75.0%	89.2%
Number of fully fledged District Clinical specialist Teams appointed	5	-	5	-	5
Number of fully-fledged Ward Based Outreach Teams appointed	60	-	-	-	-
School ISHP coverage	50.0%	50.0%	70.6%	50.0%	44.1%
School Grade 1 screening coverage	35.5%	35.5%	65.9%	35.5%	35.8%
School Grade 4 screening coverage	47.3%	47.3%	76.0%	47.3%	44.4%
School Grade 8 screening coverage	29.5%	29.5%	15.3%	29.5%	25.3%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Compliance Rate of PHC Facilities (of National Core Standards)	100.0%	26.6%	22.4%	26.1%	58.6%
	7.5%	0%	0%	0%	0%
<b>District Hospitals</b>					
Average Length of Stay	4.0 days	4.0 days	3.4 days	4.0 days	3.2 days
Inpatient Bed Utilisation Rate	70.0%	70.0%	61.5%	70.0%	62.7%
Expenditure per patient day equivalent (PDE)	R 2 000	R 2 000	R 2 285	R 2 000	R 1 947
Complaint Resolution within 25 working days rate	75.0%	75.0%	92.8%	75.0%	100.0%
Mental health admission rate	1.0%	1.0%	0.6%	1.0%	0.6%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	25.0%	0%	25.0%	12.5%
	20.0%	0%	0%	0%	0%
<b>HIV and AIDS, TB and STI control</b>					
Total clients remaining on ART (TROA) at end of the month	166 450	142 863	145 703	150 726	151 521
Number of Medical Male Circumcisions conducted	67 268	16 000	7 289	19 268	8 442
TB (new pulmonary) defaulter rate	<5%	<5%	4.1%	<5%	4.1%
TB AFB sputum result turn-around time under 48 hours rate	82.0%	82.0%	79.6%	82.0%	81.1%
TB new client treatment success rate	82.0%	82.0%	82.2%	82.0%	83.3%
HIV testing coverage (15-49 Years - Annualised)	60.0%	60.0%	22.3%	60.0%	18.5%
TB (new pulmonary) cure rate	75.0%	75.0%	75.2%	75.0%	77.1%
TB MDR confirmed treatment initiation rate	90.0%	90.0%	100.0%	90.0%	100.0%
<b>Maternal, child and women health</b>					
Immunisation coverage under 1 year	90.0%	90.0%	91.2%	90.0%	82.7%
Vitamin A coverage 12-59 months	60.0%	60.0%	57.5%	60.0%	58.7%
Deworming 12-59 months coverage	60.0%	60.0%	51.9%	60.0%	55.7%
Child under 2 years underweight for age incidence	25.00	25.00	23.76	25.00	22.65
Measles 1st dose under 1 year coverage	90.0%	90.0%	93.0%	90.0%	86.9%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	90.0%	90.0%	91.5%	90.0%	84.3%
Rotavirus (RV) 2nd Dose Coverage	95.0%	95.0%	96.7%	95.0%	100.2%
Cervical cancer screening coverage	56.0%	56.0%	36.5%	56.0%	34.2%
HPV Vaccine Coverage amongst Grade 4 girls	80.0%	80.0%	81.6%	0%	0%
Antenatal 1st visits before 20 weeks rate	70.0%	70.0%	56.3%	70.0%	58.9%
Infant given NVP within 72 hours after birth uptake rate	100.0%	100.0%	97.9%	100.0%	98.9%
Infant 1st PCR Test positive around 6 weeks rate	<2%	<2%	1.2%	<2%	1.6%
Couple year protection rate	40.0%	40.0%	39.9%	40.0%	40.1%
<b>Disease Prevention and Control</b>					
Hypertension incidence	15.7/1000	15.7/1000	13.67	15.70	15.25
Diabetes incidence	1.00	1.00	4.03	1.00	4.00
Cataract surgery rate (Uninsured Population)	1 491/1 000 000	1 491/1 000 000	686.5	1 491/1 000 000	787.6
<b>Programme 3: Emergency Medical Services</b>					
EMS operational ambulance coverage	0.58/10 000	0.58/10 000	0.55	0.58/10 000	0.61
EMS P1 urban response under 15 minutes rate	53.2%	53.2%	28.6%	53.2%	37.5%
EMS P1 rural response under 40 minutes rate	67.5%	67.5%	72.0%	67.5%	82.5%
EMS P1 call response under 60 minutes rate	82.9%	82.9%	29.0%	82.9%	22.1%
<b>Programme 4: Provincial Hospital Services</b>					
<b>General (regional) hospitals</b>					
Average Length of Stay	5.5 days	5.5 days	5.1 days	5.5 days	5.1 days
Inpatient Bed Utilisation Rate	70.0%	70.0%	63.3%	70.0%	68.3%
Expenditure per patient day equivalent (PDE)	R 2 600	R 2 600	R 2 657	R 2 600	R 2 440
Complaint Resolution within 25 working days rate	75.0%	75.0%	52.0%	75.0%	40.9%
Mental health admission rate	1.0%	1.0%	0.9%	1.0%	1.0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	25.0%	25.0%	25.0%	50.0%
	50.0%	0%	0%	0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter

FREE STATE

Sector: Health

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<b>QUARTERLY OUTPUTS</b>					
<b>Programme 5: Central Hospital Services</b>					
<b>Tertiary Hospitals</b>					
Average Length of Stay	7.5 days	7.5 days	9.8 days	7.5 days	7.2 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	108.4%	75.0%	80.4%
Expenditure per patient day equivalent (PDE)	R 4 500	R 4 500	R 2 269	R 4 500	R 2 713
Complaint Resolution within 25 working days rate	75.0%	75.0%	80.0%	75.0%	66.7%
Mental health admission rate	1.0%	1.0%	0%	1.0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	0%	100.0%	100.0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%
<b>Central Hospitals</b>					
Average Length of Stay	8.0 days	8.0 days	7.3 days	8.0 days	7.0 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	75.3%	75.0%	80.3%
Expenditure per patient day equivalent (PDE)	R 4 900	R 4 900	R 4 988	R 4 900	R 3 866
Complaint Resolution within 25 working days rate	75.0%	75.0%	98.5%	75.0%	100.0%
Mental health admission rate	0%	0%	0%	0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	100.0%	100.0%	0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	0%	0%	0%	0%
<b>Programme 8: Health Facilities Management</b>					
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	75.0%	0%	0%	0%	0%
Number of districts spending more than 90% of maintenance budget	5	-	-	-	-

1. Information submitted by: Dr. D. Molau Head Official: Health Free State Tel No (051) 408 1107

Mr. G Mahlatsi Head Official: Provincial Treasury Free State

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter

GAUTENG

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 1: Administration</b>					
Proportion of health facilities connected to the internet	44.0%	39.0%	44.1%	41.0%	44.1%
<b>Programme 2: District Health Services</b>					
PHC Utilisation rate	2.3	2.3	1.8	2.3	1.9
OHH registration visit coverage	5.0%	4.8%	107.0%	4.8%	140.9%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	100.0%	100.0%	83.5%	100.0%	86.0%
Complaint resolution within 25 working days rate	75.0%	75.0%	93.4%	75.0%	90.0%
Number of fully fledged District Clinical specialist Teams appointed	5	5	5	5	5
Number of fully-fledged Ward Based Outreach Teams appointed	140	128	144	134	175
School ISHP coverage	50.0%	50.0%	43.1%	50.0%	39.6%
School Grade 1 screening coverage	40.0%	10.0%	53.3%	12.0%	40.6%
School Grade 4 screening coverage	20.0%	20.0%	52.0%	20.0%	40.4%
School Grade 8 screening coverage	20.0%	20.0%	13.7%	20.0%	24.4%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Compliance Rate of PHC Facilities (of National Core Standards)	50.0%	13.0%	27.4%	13.0%	20.8%
	5.0%	5.0%	0%	5.0%	1.2%
<b>District Hospitals</b>					
Average Length of Stay	3.5 days	3.5 days	4.5 days	3.5 days	4.4 days
Inpatient Bed Utilisation Rate	75.0%	68.0%	60.9%	70.0%	61.9%
Expenditure per patient day equivalent (PDE)	R 1 600	R 1 600	R 2 479	R 1 600	R 2 182
Complaint Resolution within 25 working days rate	75.0%	75.0%	98.5%	75.0%	97.3%
Mental health admission rate	1.0%	1.0%	0.3%	1.0%	0.4%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	28.0%	27.3%	27.0%	18.2%
	20.0%	5.0%	0%	5.0%	0%
<b>HIV and AIDS, TB and STI control</b>					
Total clients remaining on ART (TROA) at end of the month	650 000	612 500	640 300	625 000	654 664
Number of Medical Male Circumcisions conducted	208 261	100 000	48 251	150 304	52 658
TB (new pulmonary) defaulter rate	5.0%	5.0%	4.6%	5.0%	4.6%
TB AFB sputum result turn-around time under 48 hours rate	80.0%	80.0%	65.5%	80.0%	65.1%
TB new client treatment success rate	85.0%	85.0%	85.9%	85.0%	85.9%
HIV testing coverage (15-49 Years - Annualised)	39.0%	39.0%	14.2%	39.0%	16.2%
TB (new pulmonary) cure rate	84.0%	84.0%	85.1%	84.0%	85.1%
TB MDR confirmed treatment initiation rate	65.0%	65.0%	50.2%	65.0%	50.2%
<b>Maternal, child and women health</b>					
Immunisation coverage under 1 year	90.0%	90.0%	104.6%	90.0%	103.3%
Vitamin A coverage 12-59 months	55.0%	55.0%	58.7%	55.0%	55.7%
Deworming 12-59 months coverage	55.0%	55.0%	46.7%	55.0%	42.2%
Child under 2 years underweight for age incidence	0.02	0.02	9.11	0.02	10.73
Measles 1st dose under 1 year coverage	90.0%	90.0%	106.3%	90.0%	107.4%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	90.0%	90.0%	103.0%	90.0%	104.4%
Rotavirus (RV) 2nd Dose Coverage	90.0%	90.0%	107.2%	90.0%	113.0%
Cervical cancer screening coverage	68.0%	68.0%	43.4%	68.0%	46.1%
HPV Vaccine Coverage amongst Grade 4 girls	80.0%	80.0%	0%	80.0%	0%
Antenatal 1st visits before 20 weeks rate	45.0%	45.0%	46.5%	45.0%	48.5%
Infant given NVP within 72 hours after birth uptake rate	95.0%	95.0%	98.0%	95.0%	90.8%
Infant 1st PCR Test positive around 6 weeks rate	2.0%	2.0%	1.4%	2.0%	1.1%
Couple year protection rate	50.0%	50.0%	25.3%	50.0%	30.5%
<b>Disease Prevention and Control</b>					
Hypertension incidence	0.00	0.00	14.86	0.00	15.11
Diabetes incidence	0.00	0.00	2.23	0.00	2.44
Cataract surgery rate (Uninsured Population)	1300/mil	1300/mil	1 033.5	1300/mil	1 010.5
<b>Programme 3: Emergency Medical Services</b>					
EMS operational ambulance coverage	0.06	0.06	0.59	0.06	0.31
EMS P1 urban response under 15 minutes rate	65.0%	65.0%	78.9%	65.0%	82.9%
EMS P1 rural response under 40 minutes rate	100.0%	100.0%	76.2%	100.0%	70.8%
EMS P1 call response under 60 minutes rate	85.0%	85.0%	96.4%	85.0%	95.9%
<b>Programme 4: Provincial Hospital Services</b>					
<b>General (regional) hospitals</b>					
Average Length of Stay	4.7 days	4.7 days	4.9 days	4.7 days	4.7 days
Inpatient Bed Utilisation Rate	78.0%	78.0%	86.0%	78.0%	83.8%
Expenditure per patient day equivalent (PDE)	R 2 000	R 2 000	R 2 270	R 2 000	R 2 245
Complaint Resolution within 25 working days rate	95.0%	95.0%	100.0%	95.0%	100.0%
Mental health admission rate	1.0%	1.0%	0.2%	1.0%	0.2%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	28.0%	33.3%	27.0%	22.2%
	20.0%	5.0%	0%	5.0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter

GAUTENG

Sector: Health

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<b>QUARTERLY OUTPUTS</b>					
<b>Programme 5: Central Hospital Services</b>					
<b>Tertiary Hospitals</b>					
Average Length of Stay	5.5 days	5.5 days	6.0 days	5.5 days	6.0 days
Inpatient Bed Utilisation Rate	78.0%	78.0%	83.2%	78.0%	86.0%
Expenditure per patient day equivalent (PDE)	R 2 500	R 2 500	R 2 560	R 2 500	R 2 295
Complaint Resolution within 25 working days rate	80.0%	80.0%	76.6%	80.0%	100.0%
Mental health admission rate	1.0%	1.0%	0.6%	1.0%	0.6%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	34.0%	33.3%	33.0%	66.7%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	15.0%	0%	0%	5.0%	0%
<b>Central Hospitals</b>					
Average Length of Stay	6.2 days	6.2 days	7.9 days	6.2 days	8.4 days
Inpatient Bed Utilisation Rate	78.0%	78.0%	80.2%	78.0%	86.6%
Expenditure per patient day equivalent (PDE)	R 3 275	R 3 275	R 3 971	R 3 275	R 3 304
Complaint Resolution within 25 working days rate	95.0%	95.0%	93.1%	95.0%	96.2%
Mental health admission rate	1.0%	1.0%	0%	1.0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	25.0%	25.0%	25.0%	50.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	20.0%	5.0%	0%	5.0%	0%
<b>Programme 8: Health Facilities Management</b>					
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	100.0%	25.0%	9.7%	50.0%	20.9%
Number of districts spending more than 90% of maintenance budget	5	5	-	5	-

1. Information submitted by: Dr T.E. Selabano Acting Head Official: Health Gauteng Tel No (011) 355 3857

Ms. N. Tshabalala Head Official: Provincial Treasury Gauteng

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter

KWAZULU-NATAL

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 1: Administration</b>					
Proportion of health facilities connected to the internet	25.0%	8.0%	36.1%	15.0%	38.5%
<b>Programme 2: District Health Services</b>					
PHC Utilisation rate	3.0	3.0	2.9	3.0	3.1
OHH registration visit coverage	0%	0%	0%	0%	0%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	66.4%	64.0%	64.0%	65.0%	64.4%
Complaint resolution within 25 working days rate	70.0%	61.0%	93.7%	65.0%	83.0%
Number of fully fledged District Clinical specialist Teams appointed	4	1	4	1	-
Number of fully-fledged Ward Based Outreach Teams appointed	57	39	77	45	68
School ISHP coverage	70.0%	65.0%	39.6%	68.0%	25.5%
School Grade 1 screening coverage	establish baseline	establish baseline	37.9%	establish baseline	20.7%
School Grade 4 screening coverage	establish baseline	establish baseline	35.1%	establish baseline	22.1%
School Grade 8 screening coverage	establish baseline	establish baseline	18.6%	establish baseline	11.4%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Compliance Rate of PHC Facilities (of National Core Standards)	90.0%	85.0%	6.6%	87.0%	7.9%
	25.0%	0%	1.6%	15.0%	1.2%
<b>District Hospitals</b>					
Average Length of Stay	5.6 days	5.7 days	5.9 days	5.7 days	6.1 days
Inpatient Bed Utilisation Rate	63.8%	69.0%	62.4%	67.0%	66.8%
Expenditure per patient day equivalent (PDE)	R 2 038	R 1 985	R 2 004	R 1 990	R 1 983
Complaint Resolution within 25 working days rate	70.0%	65.0%	92.8%	67.0%	95.6%
Mental health admission rate	1.1%	1.0%	1.0%	1.0%	0.8%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	0%	7.5%	0%	10.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	15.0%	0%	0%	0%	0%
<b>HIV and AIDS, TB and STI control</b>					
Total clients remaining on ART (TROA) at end of the month	1 038 556	837 145	866 790	904 281	890 605
Number of Medical Male Circumcisions conducted	291 377	72 844	35 346	82 000	34 004
TB (new pulmonary) defaulter rate	4.5%	4.8%	3.8%	4.7%	3.5%
TB AFB sputum result turn-around time under 48 hours rate	80.0%	76.0%	82.5%	77.0%	85.0%
TB new client treatment success rate	85.0%	83.0%	86.3%	84.0%	81.6%
HIV testing coverage (15-49 Years - Annualised)	58.2%	37.0%	33.4%	43.0%	38.0%
TB (new pulmonary) cure rate	85.0%	81.0%	82.8%	83.0%	83.0%
TB MDR confirmed treatment initiation rate	57.8%	53.5%	0%	55.0%	0%
<b>Maternal, child and women health</b>					
Immunisation coverage under 1 year	96.0%	95.8%	86.3%	95.8%	93.3%
Vitamin A coverage 12-59 months	55.0%	54.0%	49.3%	54.0%	66.1%
Deworming 12-59 months coverage	determine baseline	determine baseline	45.3%	determine base	59.6%
Child under 2 years underweight for age incidence	20.0%	23.0%	29.30	22.00	30.90
Measles 1st dose under 1 year coverage	94.6%	93.5%	88.4%	94.0%	94.6%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	96.2%	95.1%	88.6%	95.7%	94.4%
Rotavirus (RV) 2nd Dose Coverage	104.4%	103.7%	90.5%	104.0%	100.3%
Cervical cancer screening coverage	79.7%	79.2%	68.0%	79.4%	75.5%
HPV Vaccine Coverage amongst Grade 4 girls	determine baseline	determine baseline	0%	determine base	0%
Antenatal 1st visits before 20 weeks rate	60.0%	55.0%	52.8%	57.0%	57.6%
Infant given NVP within 72 hours after birth uptake rate	98.0%	98.0%	99.4%	98.0%	102.3%
Infant 1st PCR Test positive around 6 weeks rate	1.2%	1.7%	1.3%	1.4%	1.3%
Couple year protection rate	45.0%	40.0%	52.3%	43.0%	37.7%
<b>Disease Prevention and Control</b>					
Hypertension incidence	22.80	23.00	20.36	23.00	26.52
Diabetes incidence	2.10	2.10	7.09	2.10	8.22
Cataract surgery rate (Uninsured Population)	749.0	678.0	910.9	688.0	842.5
<b>Programme 3: Emergency Medical Services</b>					
EMS operational ambulance coverage	0.26	0.26	0.17	0.26	0.19
EMS P1 urban response under 15 minutes rate	15.0%	10.0%	4.9%	10.0%	5.2%
EMS P1 rural response under 40 minutes rate	40.0%	30.0%	31.5%	35.0%	30.3%
EMS P1 call response under 60 minutes rate	65.0%	50.0%	42.8%	55.0%	40.5%
<b>Programme 4: Provincial Hospital Services</b>					
<b>General (regional) hospitals</b>					
Average Length of Stay	5.3 days	5.9 days	6.1 days	5.7 days	6.0 days
Inpatient Bed Utilisation Rate	76.5%	75.0%	73.3%	75.5%	79.3%
Expenditure per patient day equivalent (PDE)	R 2 241	R 2 195	R 2 487	R 2 150	R 2 322
Complaint Resolution within 25 working days rate	70.0%	63.0%	94.5%	66.0%	98.6%
Mental health admission rate	1.4%	1.2%	1.1%	1.2%	1.0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	50.0%	15.4%	75.0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	23.0%	8.0%	0%	8.0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter  
 KWAZULU-NATAL  
 Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 5: Central Hospital Services</b>					
<b>Tertiary Hospitals</b>					
Average Length of Stay	9.3 days	10.0 days	9.9 days	9.7 days	10.1 days
Inpatient Bed Utilisation Rate	75.0%	60.0%	83.4%	65.0%	87.1%
Expenditure per patient day equivalent (PDE)	R 4 841	R 4 790	R 3 862	R 4 795	R 4 123
Complaint Resolution within 25 working days rate	90.0%	90.0%	100.0%	90.0%	100.0%
Mental health admission rate	1.6%	1.5%	1.0%	1.5%	1.0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	100.0%	0%	100.0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	50.0%	0%	0%	0%	0%
<b>Central Hospitals</b>					
Average Length of Stay	7.8 days	8.4 days	8.3 days	8.1 days	8.4 days
Inpatient Bed Utilisation Rate	71.9%	71.8%	65.5%	71.8%	71.1%
Expenditure per patient day equivalent (PDE)	R 3 083	R 3 003	R 12 640	R 3 033	R 11 441
Complaint Resolution within 25 working days rate	85.0%	85.0%	100.0%	85.0%	100.0%
Mental health admission rate	0%	0%	0%	0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	100.0%	0%	100.0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	0%	0%	0%	0%
<b>Programme 8: Health Facilities Management</b>					
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	11.0%	0%	37.1%	0%	14.4%
Number of districts spending more than 90% of maintenance budget	11	-	10	-	11

1. Information submitted by: Dr. Zungu Head Official: Health KwaZulu-Natal Tel No (033) 395 2799

Mr. S. Magagula Head Official: Provincial Treasury KwaZulu-Natal



QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter

LIMPOPO

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 1: Administration</b>					
Proportion of health facilities connected to the internet	0%	0%	8.1%	0%	8.1%
<b>Programme 2: District Health Services</b>					
PHC Utilisation rate	2.7	2.7	2.6	2.7	2.4
OHH registration visit coverage	12.0%	12.0%	87.3%	12.0%	63.6%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	90.0%	90.0%	87.7%	90.0%	79.1%
Complaint resolution within 25 working days rate	68.0%	68.0%	84.7%	68.0%	92.2%
Number of fully fledged District Clinical specialist Teams appointed	1	1	-	1	-
Number of fully-fledged Ward Based Outreach Teams appointed	75	75	91	75	91
School ISHP coverage	10.0%	0%	9 929.2%	0%	17 065.3%
School Grade 1 screening coverage	10.0%	0%	29.9%	0%	48.7%
School Grade 4 screening coverage	20.0%	0%	15.4%	0%	34.4%
School Grade 8 screening coverage	20.0%	0%	6.7%	0%	11.0%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Compliance Rate of PHC Facilities (of National Core Standards)	36.0%	0%	5.8%	0%	5.8%
	0%	0%	55.9%	0%	55.9%
<b>District Hospitals</b>					
Average Length of Stay	4.4 days	4.4 days	4.4 days	4.4 days	4.3 days
Inpatient Bed Utilisation Rate	70.0%	70.0%	67.7%	70.0%	77.7%
Expenditure per patient day equivalent (PDE)	R 2 100	R 2 100	R 2 615	R 2 100	R 2 431
Complaint Resolution within 25 working days rate	80.0%	80.0%	95.9%	80.0%	100.0%
Mental health admission rate	0%	0%	1.9%	0%	2.0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	20.0%	16.7%	50.0%	16.7%
	0%	0%	0%	0%	0%
<b>HIV and AIDS, TB and STI control</b>					
Total clients remaining on ART (TROA) at end of the month	190 000	188 000	194 118	189 000	-
Number of Medical Male Circumcisions conducted	62 000	3 000	9 796	62 000	-
TB (new pulmonary) defaulter rate	<5%	<5%	4.2%	<5%	4.0%
TB AFB sputum result turn-around time under 48 hours rate	32.0%	32.0%	50.8%	32.0%	50.7%
TB new client treatment success rate	60.0%	60.0%	76.2%	60.0%	26.6%
HIV testing coverage (15-49 Years - Annualised)	99.0%	99.0%	37.5%	99.0%	38.5%
TB (new pulmonary) cure rate	75.0%	75.0%	72.4%	75.0%	72.4%
TB MDR confirmed treatment initiation rate	47.0%	47.0%	100.0%	47.0%	92.9%
<b>Maternal, child and women health</b>					
Immunisation coverage under 1 year	90.0%	90.0%	77.1%	90.0%	71.7%
Vitamin A coverage 12-59 months	40.0%	40.0%	36.4%	40.0%	37.6%
Deworming 12-59 months coverage	90.0%	90.0%	28.7%	90.0%	19.1%
Child under 2 years underweight for age incidence	0.44	0.44	24.48	0.44	21.66
Measles 1st dose under 1 year coverage	90.0%	90.0%	89.4%	90.0%	79.3%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	90.0%	90.0%	86.8%	90.0%	81.6%
Rotavirus (RV) 2nd Dose Coverage	90.0%	90.0%	90.2%	90.0%	91.3%
Cervical cancer screening coverage	55.0%	55.0%	46.7%	55.0%	49.9%
HPV Vaccine Coverage amongst Grade 4 girls	60.0%	0%	50.5%	0%	50.5%
Antenatal 1st visits before 20 weeks rate	45.0%	45.0%	45.4%	45.0%	51.4%
Infant given NVP within 72 hours after birth uptake rate	50.0%	50.0%	98.9%	50.0%	99.6%
Infant 1st PCR Test positive around 6 weeks rate	< 2	< 2	2.1%	< 2	2.4%
Couple year protection rate	45.0%	45.0%	33.9%	45.0%	37.7%
<b>Disease Prevention and Control</b>					
Hypertension incidence	0.16	-	15.76	-	12.10
Diabetes incidence	0.02	-	10.82	-	9.78
Cataract surgery rate (Uninsured Population)	1 000.0	1 000.0	537.5	1 000.0	1 043.6
<b>Programme 3: Emergency Medical Services</b>					
EMS operational ambulance coverage	0.30	0.30	0.16	0.30	0.49
EMS P1 urban response under 15 minutes rate	50.0%	50.0%	56.7%	50.0%	35.1%
EMS P1 rural response under 40 minutes rate	53.0%	53.0%	80.1%	53.0%	326.5%
EMS P1 call response under 60 minutes rate	55.0%	55.0%	62.6%	55.0%	339.7%
<b>Programme 4: Provincial Hospital Services</b>					
<b>General (regional) hospitals</b>					
Average Length of Stay	5.0 days	5.0 days	5.6 days	5.0 days	5.5 days
Inpatient Bed Utilisation Rate	65.0%	65.0%	71.5%	65.0%	79.4%
Expenditure per patient day equivalent (PDE)	R 2 544	R 2 544	R 2 470	R 2 544	R 2 096
Complaint Resolution within 25 working days rate	80.0%	80.0%	100.0%	80.0%	100.0%
Mental health admission rate	0%	0%	2.1%	0%	1.7%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	100.0%	20.0%	100.0%	20.0%
	0%	0%	0%	0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter

LIMPOPO

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 5: Central Hospital Services</b>					
<b>Tertiary Hospitals</b>					
Average Length of Stay	7.0 days	7.0 days	7.3 days	7.0 days	7.1 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	74.0%	75.0%	77.4%
Expenditure per patient day equivalent (PDE)	R 3 500	R 3 500	R 3 466	R 3 500	R 3 427
Complaint Resolution within 25 working days rate	90.0%	90.0%	100.0%	90.0%	100.0%
Mental health admission rate	0%	0%	0.7%	0%	0.8%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	100.0%	0%	100.0%	0%
	0%	0%	0%	0%	0%
<b>Central Hospitals</b>					
Average Length of Stay					
Inpatient Bed Utilisation Rate					
Expenditure per patient day equivalent (PDE)					
Complaint Resolution within 25 working days rate					
Mental health admission rate					
Percentage of Hospitals that have conducted gap assessments for compliance against the National Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards					
<b>Programme 8: Health Facilities Management</b>					
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	3.7%	3.7%	20.8%	3.7%	13.8%
Number of districts spending more than 90% of maintenance budget	5	5	5	5	5

1. Information submitted by: Dr S Kabane Head Official: Health Limpopo Tel No (015) 294 6011

Mr. G. Pratt Head Official: Provincial Treasury Limpopo

\* This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter

MPUMALANGA

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 1: Administration</b>					
Proportion of health facilities connected to the internet	50.0%	0%	25.0%	0%	25.0%
<b>Programme 2: District Health Services</b>					
PHC Utilisation rate	3.0	3.0	2.3	3.0	2.3
OHH registration visit coverage	0%	0%	16.9%	0%	15.9%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	90.0%	90.0%	83.2%	90.0%	84.1%
Complaint resolution within 25 working days rate	78.0%	78.0%	76.8%	78.0%	94.2%
Number of fully fledged District Clinical specialist Teams appointed	2	-	1	1	-
Number of fully-fledged Ward Based Outreach Teams appointed	10	-	44	-	52
School ISHP coverage	25.0%	25.0%	25.8%	25.0%	34.4%
School Grade 1 screening coverage	20.0%	20.0%	7.0%	20.0%	12.3%
School Grade 4 screening coverage	15.0%	15.0%	7.3%	15.0%	9.2%
School Grade 8 screening coverage	5.0%	5.0%	2.6%	5.0%	7.0%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National	100.0%	100.0%	0%	100.0%	51.6%
Compliance Rate of PHC Facilities (of National Core Standards)	80.0%	80.0%	0%	80.0%	0%
<b>District Hospitals</b>					
Average Length of Stay	4.0 days	40.0 days	4.3 days	40.0 days	4.2 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	70.2%	75.0%	72.3%
Expenditure per patient day equivalent (PDE)	R 1 500	R 1 500	R 2 172	R 1 500	R 1 812
Complaint Resolution within 25 working days rate	70.0%	70.0%	99.3%	70.0%	95.8%
Mental health admission rate	75.0%	75.0%	0.8%	75.0%	1.0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	0%	0%	0%	52.2%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	100.0%	0%	100.0%	0%
<b>HIV and AIDS, TB and STI control</b>					
Total clients remaining on ART (TROA) at end of the month	309 071	253 199	248 121	271 823	259 239
Number of Medical Male Circumcisions conducted	60 000	5 000	16 386	30 000	14 909
TB (new pulmonary) defaulter rate	<6%	0%	0%	0%	4.9%
TB AFB sputum result turn-around time under 48 hours rate	95.0%	95.0%	62.8%	95.0%	62.2%
TB new client treatment success rate	100.0%	0%	76.0%	0%	66.7%
HIV testing coverage (15-49 Years - Annualised)	30.0%	30.0%	25.1%	30.0%	27.1%
TB (new pulmonary) cure rate	80.0%	0%	71.2%	0%	61.5%
TB MDR confirmed treatment initiation rate	90.0%	90.0%	99.7%	90.0%	98.3%
<b>Maternal, child and women health</b>					
Immunisation coverage under 1 year	90.0%	90.0%	74.1%	90.0%	75.7%
Vitamin A coverage 12-59 months	50.0%	45.0%	30.7%	47.0%	34.3%
Deworming 12-59 months coverage	30.0%	22.0%	15.4%	25.0%	18.0%
Child under 2 years underweight for age incidence	0.16	0.17	6.27	0.17	6.80
Measles 1st dose under 1 year coverage	90.0%	90.0%	80.1%	90.0%	79.4%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	90.0%	90.0%	79.4%	90.0%	79.5%
Rotavirus (RV) 2nd Dose Coverage	90.0%	90.0%	85.4%	90.0%	96.1%
Cervical cancer screening coverage	70.0%	70.0%	59.2%	70.0%	71.3%
HPV Vaccine Coverage amongst Grade 4 girls	80.0%	80.0%	0%	80.0%	0%
Antenatal 1st visits before 20 weeks rate	43.0%	43.0%	53.8%	43.0%	57.5%
Infant given NVP within 72 hours after birth uptake rate	100.0%	100.0%	100.4%	100.0%	100.4%
Infant 1st PCR Test positive around 6 weeks rate	<2%	<2%	2.0%	<2%	1.8%
Couple year protection rate	41.0%	0%	35.2%	0%	38.2%
<b>Disease Prevention and Control</b>					
Hypertension incidence	0.15	0.15	14.42	0.15	15.02
Diabetes incidence	0.15	0.15	5.44	0.15	5.19
Cataract surgery rate (Uninsured Population)	1 000.0	167.0	723.4	333.0	423.3
<b>Programme 3: Emergency Medical Services</b>					
EMS operational ambulance coverage	0.00	0.00	0.23	0.00	0.23
EMS P1 urban response under 15 minutes rate	85.0%	85.0%	67.4%	85.0%	70.5%
EMS P1 rural response under 40 minutes rate	75.0%	75.0%	64.8%	75.0%	63.6%
EMS P1 call response under 60 minutes rate	75.0%	75.0%	72.0%	75.0%	69.0%
<b>Programme 4: Provincial Hospital Services</b>					
<b>General (regional) hospitals</b>					
Average Length of Stay	4.7 days	4.7 days	5.2 days	4.7 days	4.9 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	79.5%	75.0%	76.8%
Expenditure per patient day equivalent (PDE)	R 2 332	R 2 000	R 2 895	R 2 664	R 2 995
Complaint Resolution within 25 working days rate	80.0%	80.0%	77.4%	80.0%	100.0%
Mental health admission rate	80.0%	0%	0.9%	0%	0.9%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	100.0%	66.7%	100.0%	66.7%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	100.0%	0%	100.0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter

MPUMALANGA

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 5: Central Hospital Services</b>					
<b>Tertiary Hospitals</b>					
Average Length of Stay	5.3 days	5.3 days	6.7 days	5.3 days	6.7 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	81.1%	75.0%	85.5%
Expenditure per patient day equivalent (PDE)	R 2 867	R 2 367	R 4 963	R 3 367	R 3 687
Complaint Resolution within 25 working days rate	80.0%	90.0%	0%	90.0%	0%
Mental health admission rate	80.0%	0%	0%	0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	100.0%	0%	100.0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	100.0%	0%	100.0%	0%
<b>Central Hospitals</b>					
Average Length of Stay					
Inpatient Bed Utilisation Rate					
Expenditure per patient day equivalent (PDE)					
Complaint Resolution within 25 working days rate					
Mental health admission rate					
Percentage of Hospitals that have conducted gap assessments for compliance against the National					
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards					
<b>Programme 8: Health Facilities Management</b>					
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	25.0%	25.0%	0%	25.0%	0%
Number of districts spending more than 90% of maintenance budget	3	3	-	3	-

1. Information submitted by: Dr S Mohangi Head Official: Health Mpumalanga Tel No (013) 766 3298

Ms. N.Z. Nkamba Head Official: Provincial Treasury Mpumalanga

\* This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter  
NORTHERN CAPE  
Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 1: Administration</b>					
Proportion of health facilities connected to the internet	100.0%	100.0%	9.0%	100.0%	9.0%
<b>Programme 2: District Health Services</b>					
PHC Utilisation rate	3.5	3.5	2.8	3.5	2.9
OHH registration visit coverage	60.0%	60.0%	1.0%	60.0%	0.4%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	80.0%	80.0%	49.6%	80.0%	64.9%
Complaint resolution within 25 working days rate	60.0%	60.0%	103.1%	60.0%	87.8%
Number of fully fledged District Clinical specialist Teams appointed	1	1	15	1	15
Number of fully-fledged Ward Based Outreach Teams appointed	30	30	35	30	35
School ISHP coverage	30.0%	10.0%	88.2%	15.0%	132.3%
School Grade 1 screening coverage	25.0%	7.0%	44.2%	10.0%	20.4%
School Grade 4 screening coverage	20.0%	5.0%	21.4%	10.0%	37.2%
School Grade 8 screening coverage	20.0%	5.0%	12.3%	10.0%	71.7%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National	100.0%	100.0%	79.3%	100.0%	79.3%
Compliance Rate of PHC Facilities (of National Core Standards)	21.0%	9.0%	0.4%	11.0%	0.4%
<b>District Hospitals</b>					
Average Length of Stay	3.5 days	3.5 days	3.4 days	3.5 days	3.6 days
Inpatient Bed Utilisation Rate	70.0%	70.0%	57.6%	70.0%	60.6%
Expenditure per patient day equivalent (PDE)	R 1 631	R 1 631	R 2 494	R 1 631	R 2 193
Complaint Resolution within 25 working days rate	60.0%	60.0%	89.5%	60.0%	100.0%
Mental health admission rate	0.5%	0.5%	0.2%	0.5%	0.7%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	100.0%	72.7%	100.0%	72.7%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	9.0%	9.0%	0%	9.0%	0%
<b>HIV and AIDS, TB and STI control</b>					
Total clients remaining on ART (TROA) at end of the month	44 959	40 826	37 520	42 203	38 113
Number of Medical Male Circumcisions conducted	32 615	8 154	1 516	8 154	1 964
TB (new pulmonary) defaulter rate	5.0%	5.0%	7.5%	5.0%	8.9%
TB AFB sputum result turn-around time under 48 hours rate	68.0%	62.0%	63.0%	64.0%	63.0%
TB new client treatment success rate	90.0%	84.0%	77.0%	86.0%	66.8%
HIV testing coverage (15-49 Years - Annualised)	49.5%	32.0%	18.2%	38.0%	23.7%
TB (new pulmonary) cure rate	80.0%	80.0%	67.6%	80.0%	60.2%
TB MDR confirmed treatment initiation rate	100.0%	100.0%	183.9%	100.0%	236.4%
<b>Maternal, child and women health</b>					
Immunisation coverage under 1 year	98.0%	98.0%	83.9%	98.0%	77.9%
Vitamin A coverage 12-59 months	40.0%	37.0%	31.2%	38.0%	36.7%
Deworming 12-59 months coverage	30.0%	30.0%	26.8%	30.0%	32.7%
Child under 2 years underweight for age incidence	0.10	0.10	46.14	0.10	46.52
Measles 1st dose under 1 year coverage	98.0%	98.0%	84.4%	98.0%	80.4%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	95.0%	95.0%	85.1%	95.0%	83.4%
Rotavirus (RV) 2nd Dose Coverage	95.0%	95.0%	89.0%	95.0%	97.0%
Cervical cancer screening coverage	50.0%	50.0%	30.0%	50.0%	38.6%
HPV Vaccine Coverage amongst Grade 4 girls	80.0%	80.0%	85.8%	80.0%	84.8%
Antenatal 1st visits before 20 weeks rate	60.0%	60.0%	36.2%	60.0%	36.8%
Infant given NVP within 72 hours after birth uptake rate	95.0%	92.0%	99.7%	93.0%	100.2%
Infant 1st PCR Test positive around 6 weeks rate	2.5%	2.5%	2.3%	2.5%	1.4%
Couple year protection rate	40.0%	40.0%	32.2%	40.0%	33.6%
<b>Disease Prevention and Control</b>					
Hypertension incidence	17 / 1000	17 / 1000	18.24	17 / 1000	24.75
Diabetes incidence	2.9 / 1000	2.9 / 1000	12.51	2.9 / 1000	18.89
Cataract surgery rate (Uninsured Population)	1200/1000000	1200/1000000	552.8	1200/1000000	905.7
<b>Programme 3: Emergency Medical Services</b>					
EMS operational ambulance coverage	0.50	0.50	0.97	0.50	0.77
EMS P1 urban response under 15 minutes rate	60.0%	60.0%	59.0%	60.0%	63.2%
EMS P1 rural response under 40 minutes rate	40.0%	40.0%	54.9%	40.0%	51.1%
EMS P1 call response under 60 minutes rate	60.0%	60.0%	48.8%	60.0%	55.8%
<b>Programme 4: Provincial Hospital Services</b>					
<b>General (regional) hospitals</b>					
Average Length of Stay	4.8 days	4.8 days	4.1 days	4.8 days	4.0 days
Inpatient Bed Utilisation Rate	72.0%	72.0%	95.7%	72.0%	101.8%
Expenditure per patient day equivalent (PDE)	R 1 986	R 1 986	R 2 748	R 1 986	R 2 426
Complaint Resolution within 25 working days rate	60.0%	60.0%	0%	60.0%	100.0%
Mental health admission rate	1.0%	1.0%	0.9%	1.0%	0.4%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	100.0%	100.0%	100.0%	100.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	100.0%	0%	100.0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter  
NORTHERN CAPE  
Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 5: Central Hospital Services</b>					
<b>Tertiary Hospitals</b>					
Average Length of Stay	5.5 days	5.5 days	6.5 days	5.5 days	6.5 days
Inpatient Bed Utilisation Rate	74.0%	74.0%	70.9%	74.0%	75.2%
Expenditure per patient day equivalent (PDE)	R 3 663	R 3 663	R 4 051	R 3 663	R 3 567
Complaint Resolution within 25 working days rate	60.0%	60.0%	100.0%	60.0%	60.7%
Mental health admission rate	2.3%	2.3%	0.6%	2.3%	0.0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	100.0%	0%	100.0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	100.0%	0%	100.0%	0%
<b>Central Hospitals</b>					
Average Length of Stay					
Inpatient Bed Utilisation Rate					
Expenditure per patient day equivalent (PDE)					
Complaint Resolution within 25 working days rate					
Mental health admission rate					
Percentage of Hospitals that have conducted gap assessments for compliance against the National					
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards					
<b>Programme 8: Health Facilities Management</b>					
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	18.0%	2.0%	36.3%	5.0%	111.9%
Number of districts spending more than 90% of maintenance budget	5	1	-	2	-

1. Information submitted by: Ms. G Matlaopane Head Official: Health Northern Cape Tel No (040) 608 1111

Mr.H.V. Gumbo Acting Head Official: Provincial Treasury Northern Cape

\* This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter

NORTH WEST

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 1: Administration</b>					
Proportion of health facilities connected to the internet	21.0%	0%	37.4%	18.0%	34.3%
<b>Programme 2: District Health Services</b>					
PHC Utilisation rate	3.5	3.5	2.3	3.5	2.4
OHH registration visit coverage	36.0%	9.0%	1.6%	9.0%	0.6%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	80.0%	73.0%	23.5%	76.0%	37.5%
Complaint resolution within 25 working days rate	80.0%	78.0%	97.6%	80.0%	99.0%
Number of fully fledged District Clinical specialist Teams appointed	5	5	-	5	-
Number of fully-fledged Ward Based Outreach Teams appointed	296	74	-	74	-
School ISHP coverage	80.0%	20.0%	42.9%	20.0%	60.9%
School Grade 1 screening coverage	70.0%	20.0%	43.1%	20.0%	43.7%
School Grade 4 screening coverage	70.0%	20.0%	20.7%	20.0%	24.6%
School Grade 8 screening coverage	50.0%	15.0%	9.1%	15.0%	24.3%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National	100.0%	100.0%	5.0%	100.0%	4.4%
Compliance Rate of PHC Facilities (of National Core Standards)	100.0%	25.0%	3.1%	25.0%	4.7%
<b>District Hospitals</b>					
Average Length of Stay	3.8 days	3.8 days	4.8 days	3.8 days	4.7 days
Inpatient Bed Utilisation Rate	65.0%	65.0%	62.5%	65.0%	59.2%
Expenditure per patient day equivalent (PDE)	R 2 300	R 2 300	R 2 402	R 2 300	R 3 926
Complaint Resolution within 25 working days rate	80.0%	80.0%	97.4%	80.0%	96.0%
Mental health admission rate	1.2%	1.2%	0.6%	1.2%	0.7%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	100.0%	20.0%	100.0%	40.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	27.0%	7.0%	0%	7.0%	0%
<b>HIV and AIDS, TB and STI control</b>					
Total clients remaining on ART (TROA) at end of the month	226 735	214 184	192 169	218 368	186 212
Number of Medical Male Circumcisions conducted	50 135	12 533	16 899	12 534	15 929
TB (new pulmonary) defaulter rate	<5%	<5%	2.7%	<5%	2.3%
TB AFB sputum result turn-around time under 48 hours rate	80.0%	80.0%	80.4%	80.0%	82.0%
TB new client treatment success rate	82.0%	82.0%	32.8%	82.0%	22.0%
HIV testing coverage (15-49 Years - Annualised)	40.0%	34.0%	29.4%	36.0%	33.1%
TB (new pulmonary) cure rate	80.0%	80.0%	30.3%	80.0%	20.3%
TB MDR confirmed treatment initiation rate	93.0%	93.0%	179.7%	93.0%	320.0%
<b>Maternal, child and women health</b>					
Immunisation coverage under 1 year	92.0%	92.0%	78.3%	92.0%	74.2%
Vitamin A coverage 12-59 months	55.0%	47.0%	40.4%	50.0%	42.6%
Deworming 12-59 months coverage	50.0%	47.0%	35.5%	50.0%	38.9%
Child under 2 years underweight for age incidence	<25%	<29%	24.35	<27%	21.28
Measles 1st dose under 1 year coverage	95.0%	95.0%	83.7%	95.0%	78.4%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	95.0%	95.0%	82.0%	95.0%	47.7%
Rotavirus (RV) 2nd Dose Coverage	100.0%	100.0%	84.2%	100.0%	88.7%
Cervical cancer screening coverage	70.0%	65.0%	53.5%	66.0%	78.1%
HPV Vaccine Coverage amongst Grade 4 girls	90.0%	90.0%	0%	0%	0%
Antenatal 1st visits before 20 weeks rate	60.0%	53.0%	34.6%	56.0%	35.4%
Infant given NVP within 72 hours after birth uptake rate	99.0%	99.0%	97.8%	99.0%	104.1%
Infant 1st PCR Test positive around 6 weeks rate	<2%	<2%	1.5%	<2%	1.6%
Couple year protection rate	37.0%	33.0%	72.6%	34.0%	78.4%
<b>Disease Prevention and Control</b>					
Hypertension incidence	0.20	0.05	14.41	0.05	17.08
Diabetes incidence	0.01	0.00	3.85	0.00	3.26
Cataract surgery rate (Uninsured Population)	800/1m	200/1m	775.8	200/1m	792.7
<b>Programme 3: Emergency Medical Services</b>					
EMS operational ambulance coverage	0.25%	0.25%	0.16	0.25%	0.18
EMS P1 urban response under 15 minutes rate	69.0%	69.0%	64.0%	69.0%	59.1%
EMS P1 rural response under 40 minutes rate	71.0%	71.0%	65.3%	71.0%	62.9%
EMS P1 call response under 60 minutes rate	83.0%	83.0%	73.9%	83.0%	62.7%
<b>Programme 4: Provincial Hospital Services</b>					
<b>General (regional) hospitals</b>					
Average Length of Stay	5.0 days	5.0 days	6.7 days	5.0 days	6.4 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	80.1%	75.0%	84.3%
Expenditure per patient day equivalent (PDE)	R 2 300	R 2 300	R 1 996	R 2 300	R 3 034
Complaint Resolution within 25 working days rate	90.0%	90.0%	100.0%	90.0%	100.0%
Mental health admission rate	1.2%	1.2%	2.9%	1.2%	2.9%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	100.0%	50.0%	100.0%	100.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	100.0%	0%	100.0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter

NORTH WEST

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 5: Central Hospital Services</b>					
<b>Tertiary Hospitals</b>					
Average Length of Stay	5.0 days	5.0 days	6.6 days	5.0 days	4.8 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	38.6%	75.0%	54.2%
Expenditure per patient day equivalent (PDE)	R 2 400	R 2 400	R 476	R 2 400	R 805
Complaint Resolution within 25 working days rate	90.0%	90.0%	90.5%	90.0%	96.6%
Mental health admission rate	0%	0%	2.2%	0%	1.3%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	0%	0%	0%	0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%
<b>Central Hospitals</b>					
Average Length of Stay					
Inpatient Bed Utilisation Rate					
Expenditure per patient day equivalent (PDE)					
Complaint Resolution within 25 working days rate					
Mental health admission rate					
Percentage of Hospitals that have conducted gap assessments for compliance against the National					
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards					
<b>Programme 8: Health Facilities Management</b>					
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	13.0%	0%	7.9%	0%	11.9%
Number of districts spending more than 90% of maintenance budget	4	-	5	-	5

1. Information submitted by: Mr. K. Mothabane Acting Head Official: Health North West Tel No (018) 388 3843

Mr. N.I. Kunene Acting Head Official: Provincial Treasury North West

\* This province does not have Central Hospitals



QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter  
WESTERN CAPE  
Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 1: Administration</b>					
Proportion of health facilities connected to the internet	No target set	No target set	90.1%	No target set	90.1%
<b>Programme 2: District Health Services</b>					
PHC Utilisation rate	2.4	2.4	2.3	2.4	2.4
OHH registration visit coverage	Not applicable in W Cape	Not applicable in W Cape	0%	Not applicable in W Cape	0%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	94.2%	94.2%	82.9%	94.2%	79.0%
Complaint resolution within 25 working days rate	88.6%	88.7%	96.3%	88.7%	96.3%
Number of fully fledged District Clinical specialist Teams appointed	Not applicable in W Cape	Not applicable in W Cape	-	Not applicable in W Cape	-
Number of fully-fledged Ward Based Outreach Teams appointed	Not applicable in W Cape	Not applicable in W Cape	-	Not applicable in W Cape	-
School ISHP coverage	61.6%	61.6%	33.8%	61.6%	39.6%
School Grade 1 screening coverage	29.1%	29.1%	22.6%	29.1%	23.6%
School Grade 4 screening coverage	No target set	No target set	0.2%	No target set	0%
School Grade 8 screening coverage	No target set	No target set	0.1%	No target set	0%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Compliance Rate of PHC Facilities (of National Core Standards)	29.0%	7.2%	0%	7.2%	1.1%
	No target set	No target set	0%	No target set	0%
<b>District Hospitals</b>					
Average Length of Stay	3.2 days	3.2 days	3.2 days	3.2 days	3.1 days
Inpatient Bed Utilisation Rate	83.4%	83.4%	89.4%	83.4%	91.6%
Expenditure per patient day equivalent (PDE)	R 1 865	R 1 865	R 1 710	R 1 865	R 1 803
Complaint Resolution within 25 working days rate	78.4%	78.4%	88.6%	78.4%	88.1%
Mental health admission rate	Not applicable	Not applicable	0.8%	Not applicable	1.0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	76.5%	20.6%	0%	20.6%	2.9%
	No target set	No target set	0%	No target set	0%
<b>HIV and AIDS, TB and STI control</b>					
Total clients remaining on ART (TROA) at end of the month	174 868	149 265	161 283	157 205	162 845
Number of Medical Male Circumcisions conducted	21 502	5 376	4 264	5 376	4 653
TB (new pulmonary) defaulter rate	7.1%	7.1%	13.9%	7.1%	7.5%
TB AFB sputum result turn-around time under 48 hours rate	69.9%	69.9%	71.4%	69.9%	70.3%
TB new client treatment success rate	85.5%	85.5%	79.6%	85.5%	70.6%
HIV testing coverage (15-49 Years - Annualised)	30.7%	30.7%	29.2%	30.7%	28.0%
TB (new pulmonary) cure rate	82.5%	82.5%	82.0%	82.5%	82.1%
TB MDR confirmed treatment initiation rate	No target set	No target set	0%	No target set	0%
<b>Maternal, child and women health</b>					
Immunisation coverage under 1 year	91.9%	91.9%	87.5%	91.9%	84.6%
Vitamin A coverage 12-59 months	44.8%	44.8%	48.4%	44.8%	43.6%
Deworming 12-59 months coverage	30.2%	30.2%	41.8%	30.2%	38.7%
Child under 2 years underweight for age incidence	18.00	18.00	17.01	18.00	14.39
Measles 1st dose under 1 year coverage	92.0%	92.0%	91.1%	92.0%	87.6%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	92.1%	92.1%	88.7%	92.1%	87.7%
Rote Virus (RV) 2nd Dose Coverage	91.5%	91.5%	92.1%	91.5%	97.9%
Cervical cancer screening coverage	57.0%	57.0%	55.1%	57.0%	67.0%
HPV Vaccine Coverage amongst Grade 4 girls	No target set	No target set	83.5%	No target set	0%
Antenatal 1st visits before 20 weeks rate	64.0%	64.0%	62.0%	64.0%	65.0%
Infant given NVP within 72 hours after birth uptake rate	98.6%	98.6%	99.3%	98.6%	99.2%
Infant 1st PCR Test positive around 6 weeks rate	1.7%	1.7%	1.4%	1.7%	1.6%
Couple year protection rate	61.3%	61.3%	58.6%	61.3%	60.2%
<b>Disease Prevention and Control</b>					
Hypertension incidence	10.92	4.00	7.66	2.00	9.55
Diabetes incidence	1.51	1.00	3.42	1.00	4.16
Cataract surgery rate (Uninsured Population)	1 724.0	1 909.0	1 755.9	838.0	1 672.1
<b>Programme 3: Emergency Medical Services</b>					
EMS operational ambulance coverage	0.00	0.00	0.40	0.00	0.40
EMS P1 urban response under 15 minutes rate	75.0%	75.0%	56.2%	75.0%	58.6%
EMS P1 rural response under 40 minutes rate	90.0%	90.0%	81.0%	90.0%	83.9%
EMS P1 call response under 60 minutes rate	80.0%	80.0%	94.6%	80.0%	94.7%
<b>Programme 4: Provincial Hospital Services</b>					
<b>General (regional) hospitals</b>					
Average Length of Stay	3.8 days	3.8 days	3.8 days	3.8 days	3.7 days
Inpatient Bed Utilisation Rate	85.6%	85.8%	86.3%	85.2%	83.8%
Expenditure per patient day equivalent (PDE)	R 2 618	R 2 646	R 2 421	R 2 561	R 2 649
Complaint Resolution within 25 working days rate	92.7%	92.2%	94.8%	92.2%	98.5%
Mental health admission rate	1.7%	1.6%	1.5%	1.6%	1.2%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	100.0%	0%	0%	0%	0%
	No target set	No target set	0%	No target set	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter  
 WESTERN CAPE  
 Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 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
<b>QUARTERLY OUTPUTS</b>					
<b>Programme 5: Central Hospital Services</b>					
<b>Tertiary Hospitals</b>					
Average Length of Stay	3.7 days	3.7 days	3.9 days	3.7 days	3.8 days
Inpatient Bed Utilisation Rate	85.0%	85.0%	86.4%	85.0%	85.7%
Expenditure per patient day equivalent (PDE)	R 4 534	R 4 534	R 4 208	R 4 534	R 4 816
Complaint Resolution within 25 working days rate	90.0%	90.6%	67.6%	90.6%	78.9%
Mental health admission rate	N/A	N/A	0%	N/A	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	0%	0%	0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	No target set	No target set	0%	No target set	0%
<b>Central Hospitals</b>					
Average Length of Stay	6.1 days	6.1 days	6.3 days	6.1 days	6.2 days
Inpatient Bed Utilisation Rate	85.6%	85.6%	85.6%	85.6%	89.3%
Expenditure per patient day equivalent (PDE)	R 4 236	R 4 236	R 4 274	R 4 236	R 4 097
Complaint Resolution within 25 working days rate	82.5%	82.2%	86.4%	82.2%	90.3%
Mental health admission rate	1.4%	1.4%	1.3%	1.4%	1.3%
Percentage of Hospitals that have conducted gap assessments for compliance against the National	100.0%	0%	0%	0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	No target set	No target set	0%	0%	0%
<b>Programme 8: Health Facilities Management</b>					
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	100.0%	100.0%	107.8%	100.0%	71.0%
Number of districts spending more than 90% of maintenance budget	No target set	No target set	-	No target set	-

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