

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th 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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 1: Administration									
Proportion of health facilities connected to the internet	-	-	0%	-	0%	-	0%	-	0%
Programme 2: District Health Services									
PHC Utilisation rate	2.8	2.8	2.6	2.8	2.8	2.8	2.6	2.8	2.7
OHV registration visit coverage	54.0%	12.0%	145.3%	15.0%	13.1%	15.0%	14.2%	12.0%	8.4%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	91.0%	91.0%	76.5%	91.0%	80.9%	91.0%	78.1%	91.0%	76.4%
Complaint resolution within 25 working days rate	80.0%	80.0%	96.2%	80.0%	71.2%	80.0%	78.9%	80.0%	100.3%
Number of fully fledged District Clinical specialist Teams appointed	3	-	-	-	-	-	-	3	-
Number of fully-fledged Ward Based Outreach Teams appointed	12	3	15	3	7	3	-	3	1
School ISHP coverage	10.7%	10.7%	36.5%	10.7%	25.2%	10.7%	21.9%	10.7%	21.7%
School Grade 1 screening coverage	22.4%	6.4%	18.0%	10.0%	42.8%	6.0%	13.6%	22.4%	3.7%
School Grade 4 screening coverage	18.1%	6.0%	16.7%	7.1%	32.6%	5.0%	10.8%	18.1%	3.3%
School Grade 8 screening coverage	14.8%	4.0%	7.3%	5.8%	13.7%	5.0%	3.8%	14.8%	1.6%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Core	49.0%	-	0%	-	0%	-	15.0%	49.0%	8.5%
Compliance Rate of PHC Facilities (of National Core Standards)	40.0%	40.0%	0%	40.0%	0%	40.0%	0%	40.0%	0%
District Hospitals									
Average Length of Stay	4.9 days	4.9 days	5.2 days	4.9 days	5.1 days	4.9 days	5.2 days	4.9 days	5.3 days
Inpatient Bed Utilisation Rate	65.0%	65.0%	57.8%	65.0%	60.9%	65.0%	59.0%	65.0%	58.1%
Expenditure per patient day equivalent (PDE)	R 1 380	R 1 380	R 1 943	R 1 380	R 2 008	R 1 380	R 1 98	R 1 380	R 2 007
Complaint Resolution within 25 working days rate	90.0%	90.0%	97.3%	90.0%	94.3%	90.0%	91.8%	90.0%	95.4%
Mental health admission rate	-	-	0%	-	0%	-	-	-	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	68.2%	-	0%	-	0%	-	0%	68.2%	39.4%
Proportion of Hospitals assessed as compliant with the Extreme Measures of National Core Standards	80.0%	80.0%	0%	80.0%	38.5%	80.0%	0%	80.0%	0%
HIV and AIDS, TB and STI control									
Total clients remaining on ART (TROA) at end of the month	387 387	18 750	18 187	18 750	18 717	18 750	16 015	18 750	16 520
Number of Medical Male Circumcisions conducted	42 000	16 000	379	2 000	417	22 000	417	2 000	188
TB (new pulmonary) defaulter rate	7.0%	7.0%	7.6%	7.0%	8.2%	7.0%	7.8%	7.0%	5.6%
TB AFB sputum result turn-around time under 48 hours rate	73.0%	73.0%	57.5%	73.0%	54.5%	73.0%	55.1%	73.0%	53.7%
TB new client treatment success rate	80.0%	80.0%	77.9%	80.0%	79.4%	80.0%	79.5%	80.0%	54.4%
HIV testing coverage (15-49 Years - Annualised)	49.0%	45.0%	31.2%	47.0%	34.2%	48.0%	32.1%	49.0%	34.6%
TB (new pulmonary) cure rate	75.0%	-	0%	-	0%	-	0%	75.0%	47.1%
TB MDR confirmed treatment initiation rate	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	0%	100.0%	0%
Maternal, child and women health									
Immunisation coverage under 1 year	90.0%	90.0%	76.8%	90.0%	78.4%	90.0%	78.3%	90.0%	88.8%
Vitamin A coverage 12-59 months	55.0%	55.0%	46.1%	55.0%	54.2%	55.0%	48.1%	55.0%	59.2%
Deworming 12-59 months coverage	50.0%	50.0%	40.1%	50.0%	40.2%	50.0%	27.5%	50.0%	35.8%
Child under 2 years underweight for age incidence	0.20	0.20	31.61	0.20	27.56	0.20	22.53	0.20	17.06
Measles 1st dose under 1 year coverage	95.0%	95.0%	84.4%	95.0%	85.2%	95.0%	85.6%	95.0%	97.5%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	90.0%	90.0%	81.1%	90.0%	80.2%	90.0%	83.6%	90.0%	95.1%
Rotavirus (RV) 2nd Dose Coverage	90.0%	90.0%	79.1%	90.0%	84.7%	90.0%	81.3%	90.0%	87.3%
Cervical cancer screening coverage	42.0%	42.0%	46.1%	42.0%	64.7%	42.0%	53.9%	42.0%	57.4%
HPV Vaccine Coverage amongst Grade 4 girls	80.0%	80.0%	82.2%	80.0%	92.7%	80.0%	0%	80.0%	0%
Antenatal 1st visits before 20 weeks rate	42.0%	42.0%	43.7%	42.0%	49.1%	42.0%	49.1%	42.0%	48.6%
Infant given NVP within 72 hours after birth uptake rate	100.0%	100.0%	101.8%	100.0%	100.0%	100.0%	100.5%	100.0%	100.1%
Infant 1st PCR Test positive around 6 weeks rate	2.8%	2.8%	1.8%	2.8%	1.6%	2.8%	1.8%	2.8%	2.3%
Couple year protection rate	60.0%	-	0%	-	0%	-	0%	60.0%	46.4%
Disease Prevention and Control									
Hypertension incidence	0.04	0.04	24.50	0.04	26.62	0.04	1.50	3.50	14.09
Diabetes incidence	0.00	0.00	7.94	0.00	9.61	0.00	0.80	0.10	7.68
Cataract surgery rate (Uninsured Population)	1 050.0	262.5	1 094.6	262.5	1 225.6	262.5	884.6	262.5	1 013.3
Programme 3: Emergency Medical Services									
EMS operational ambulance coverage	0.50	0.29	0.73	0.48	0.31	0.50	0.35	0.50	0.34
EMS P1 urban response under 15 minutes rate	65.0%	65.0%	38.2%	65.0%	42.0%	65.0%	61.4%	65.0%	60.1%
EMS P1 rural response under 40 minutes rate	65.0%	65.0%	44.0%	65.0%	50.6%	65.0%	77.5%	65.0%	51.7%
EMS P1 call response under 60 minutes rate	70.0%	70.0%	65.4%	70.0%	65.9%	70.0%	70.7%	70.0%	66.5%
Programme 4: Provincial Hospital Services									
General (regional) hospitals									
Average Length of Stay	4.6 days	4.6 days	5.3 days	4.6 days	4.7 days	4.6 days	5.1 days	4.6 days	4.6 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	67.6%	75.0%	66.7%	75.0%	64.2%	75.0%	65.1%
Expenditure per patient day equivalent (PDE)	R 2 077	R 2 077	R 2 058	R 2 077	R 2 331	R 2 077	R 2 439	R 2 077	R 2 218
Complaint Resolution within 25 working days rate	80.0%	80.0%	100.0%	80.0%	83.3%	80.0%	90.4%	80.0%	100.0%
Mental health admission rate	-	-	0%	-	0%	-	0%	-	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	-	0%	-	0%	-	0%	100.0%	0%
Proportion of Hospitals assessed as compliant with the Extreme Measures of National Core Standards	80.0%	80.0%	0%	80.0%	0%	80.0%	0%	80.0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th Quarter
EASTERN CAPE

Sector: Health

Programme / Subprogramme / Performance Measures

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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 5: Central Hospital Services									
Tertiary Hospitals									
Average Length of Stay	5.5 days	5.5 days	6.1 days	5.5 days	6.1 days	5.5 days	6.0 days	5.5 days	6.1 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	74.1%	75.0%	76.4%	75.0%	74.2%	75.0%	72.3%
Expenditure per patient day equivalent (PDE)	R 1 923	R 1 900	R 2 644	R 1 900	R 3 231	R 1 900	R 3 361	R 1 923	R 3 412
Complaint Resolution within 25 working days rate	80.0%	80.0%	100.0%	80.0%	84.8%	80.0%	83.9%	80.0%	100.0%
Mental health admission rate	-	-	0%	-	0%	-	0%	100.0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	-	0%	-	0%	100.0%	0%	100.0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	80.0%	100.0%	0%	100.0%	0%	100.0%	0%	100.0%	0%
Central Hospitals									
Average Length of Stay	5.5 days	5.5 days	7.2 days	5.5 days	6.8 days	5.5 days	6.4 days	5.5 days	6.5 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	91.9%	75.0%	95.0%	75.0%	87.4%	75.0%	83.5%
Expenditure per patient day equivalent (PDE)	R 1 950	R 1 900	R 0	R 1 900	R 0	R 1 900	R 0	R 1 950	R 0
Complaint Resolution within 25 working days rate	80.0%	80.0%	100.0%	80.0%	97.3%	80.0%	100.0%	80.0%	100.0%
Mental health admission rate	-	-	0%	-	0%	-	0%	-	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	-	0%	-	0%	100.0%	0%	80.0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	80.0%	80.0%	0%	80.0%	0%	80.0%	0%	80.0%	0%
Programme 8: Health Facilities Management									
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	29.0%	7.3%	14.9%	7.3%	23.6%	7.3%	23.6%	7.3%	11.1%
Number of districts spending more than 90% of maintenance budget	8	8	8	8	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-Mhembu Head Official: Provincial Treasury Eastern Cape

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th 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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
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QUARTERLY OUTPUTS

Programme 1: Administration

Proportion of health facilities connected to the internet 50.0% 0% 0% 0% 0% 0% 0% 0% 36.3%

Programme 2: District Health Services

PHC Utilisation rate 3.0 3.0 2.4 3.0 2.6 3.0 2.4 3.0 2.4
 OHH registration visit coverage 10.9% 10.9% 2.6% 10.9% 3.0% 10.9% 2.1% 10.9% 1.3%
 PHC supervisor visit rate (fixed clinic/CHC/CDC) 85.0% 85.0% 58.5% 85.0% 51.8% 85.0% 71.7% 85.0% 64.1%
 Complaint resolution within 25 working days rate 75.0% 75.0% 92.2% 75.0% 89.3% 75.0% 96.4% 75.0% 95.6%
 Number of fully fledged District Clinical specialist Teams appointed 5 - 5 - - - - 60 46
 Number of fully-fledged Ward Based Outreach Teams appointed - - - - - - - - -
 School ISHP coverage 50.0% 50.0% 70.6% 50.0% 51.7% 50.0% 24.8% 50.0% 20.9%
 School Grade 1 screening coverage 35.5% 35.5% 65.9% 35.5% 39.4% 35.5% 29.3% 35.5% 7.0%
 School Grade 4 screening coverage 47.3% 47.3% 76.0% 47.3% 45.1% 47.3% 41.2% 47.3% 10.8%
 School Grade 6 screening coverage 29.5% 29.5% 15.3% 29.5% 45.1% 29.5% 18.6% 29.5% 13.3%
 Percentage of fixed facilities that have conducted gap assessments for compliance against the National Core Compliance Rate of PHC Facilities (of National Core Standards) 100.0% 26.6% 22.4% 26.1% 58.6% 23.4% 19.0% 23.9% 0%
 Compliance Rate of PHC Facilities (of National Core Standards) 7.5% 0% 0% 0% 0% 0% 0.0% 7.5% 0%

District Hospitals

Average Length of Stay 4.0 days 4.0 days 3.4 days 4.0 days 3.2 days 4.0 days 3.3 days 4.0 days 3.3 days
 Inpatient Bed Utilisation Rate 70.0% 70.0% 61.5% 70.0% 61.3% 70.0% 61.4% 70.0% 51.6%
 Expenditure per patient day equivalent (PDE) R 2 000 R 2 000 R 2 285 R 2 000 R 2 025 R 2 000 R 1 924 R 2 000 R 2 214
 Complaint Resolution within 25 working days rate 75.0% 75.0% 92.8% 75.0% 93.9% 75.0% 79.3% 75.0% 96.4%
 Mental health admission rate 1.0% 1.0% 0.6% 1.0% 0.7% 1.0% 0.7% 1.0% 0.5%
 Percentage of Hospitals that have conducted gap assessments for compliance against the National Core 100.0% 25.0% 0% 25.0% 12.5% 16.7% 12.5% 33.3% 0%
 Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards 20.0% 0% 0% 0% 0% 0% 0% 20.0% 0%

HIV and AIDS, TB and STI control

Total clients remaining on ART (TROA) at end of the month 166 450 142 863 145 703 150 726 158 948 158 588 160 978 166 450 159 327
 Number of Medical Male Circumcisions conducted 67 268 16 000 7 289 19 268 7 662 16 000 7 680 16 000 2 511
 TB (new pulmonary) defaulter rate <5% <5% 4.1% <5% 4.1% <5% 4.4% <5% 4.4%
 TB AFB sputum result turn-around time under 48 hours rate 82.0% 82.0% 79.6% 82.0% 81.1% 82.0% 79.5% 82.0% 82.2%
 TB new client treatment success rate 82.0% 82.0% 82.2% 82.0% 83.3% 82.0% 82.6% 82.0% 74.3%
 HIV testing coverage (15-49 Years - Annualised) 60.0% 60.0% 22.3% 60.0% 19.4% 60.0% 27.2% 60.0% 26.0%
 TB (new pulmonary) cure rate 75.0% 75.0% 75.2% 75.0% 77.1% 75.0% 76.3% 75.0% 66.3%
 TB MDR confirmed treatment initiation rate 90.0% 90.0% 100.0% 90.0% 100.0% 90.0% 90.0% 90.0% 100.0%

Maternal, child and women health

Immunisation coverage under 1 year 90.0% 90.0% 91.2% 90.0% 85.1% 90.0% 87.4% 90.0% 86.3%
 Vitamin A coverage 12-59 months 60.0% 60.0% 57.5% 60.0% 60.5% 60.0% 52.3% 60.0% 57.9%
 Deworming 12-59 months coverage 60.0% 60.0% 51.9% 60.0% 58.8% 60.0% 52.3% 60.0% 52.8%
 Child under 2 years underweight for age incidence 25.00 25.00 23.76 25.00 23.84 25.00 25.29 25.00 25.31
 Measles 1st dose under 1 year coverage 90.0% 90.0% 93.0% 90.0% 89.1% 90.0% 88.8% 90.0% 91.5%
 Pneumococcal Vaccine (PCV) 3rd Dose Coverage 90.0% 90.0% 91.5% 90.0% 86.4% 90.0% 88.7% 90.0% 89.2%
 Rotavirus (RV) 2nd Dose Coverage 95.0% 95.0% 96.7% 95.0% 100.5% 95.0% 97.3% 95.0% 85.2%
 Cervical cancer screening coverage 56.0% 56.0% 36.5% 56.0% 40.2% 56.0% 40.2% 56.0% 45.5%
 HPV Vaccine Coverage amongst Grade 4 girls 80.0% 80.0% 81.6% 80.0% 80.0% 80.0% 88.4% 80.0% 0%
 Antenatal 1st visits before 20 weeks rate 70.0% 70.0% 56.3% 70.0% 59.7% 70.0% 58.0% 70.0% 57.9%
 Infant given NVP within 72 hours after birth uptake rate 100.0% 100.0% 97.9% 100.0% 99.1% 100.0% 97.4% 100.0% 96.4%
 Infant 1st PCR Test positive around 6 weeks rate <2% <2% 1.2% <2% 0.9% <2% 1.5% <2% 1.9%
 Couple year protection rate 40.0% 40.0% 39.9% 40.0% 40.0% 40.0% 50.1% 40.0% 38.1%

Disease Prevention and Control

Hypertension incidence 15.7/1000 15.7/1000 13.67 15.70 15.01 15.70 11.53 15.70 10.18
 Diabetes incidence 1.00 1.00 4.03 1.00 4.12 1.00 3.49 1.00 3.92
 Cataract surgery rate (Uninsured Population) 1 491/1 000 000 1 491/1 000 000 686.5 1 491/1 000 000 832.0 1 491/1 000 000 1 562.9 1 491/1 000 000 761.0

Programme 3: Emergency Medical Services

EMS operational ambulance coverage 0.58/10 000 0.58/10 000 0.55 0.58/10 000 - 0.58/10 000 0.64 0.58/10 000 0.64
 EMS P1 urban response under 15 minutes rate 53.2% 53.2% 28.6% 53.2% 33.8% 53.2% 30.8% 53.2% 32.4%
 EMS P1 rural response under 40 minutes rate 67.5% 67.5% 72.0% 67.5% 86.3% 67.5% 80.4% 67.5% 71.9%
 EMS P1 call response under 60 minutes rate 82.9% 82.9% 29.0% 82.9% 26.6% 82.9% 60.7% 82.9% 37.5%

Programme 4: Provincial Hospital Services

General (regional) hospitals

Average Length of Stay 5.5 days 5.5 days 5.1 days 5.5 days 5.1 days 5.5 days 5.1 days 5.5 days 5.4 days
 Inpatient Bed Utilisation Rate 70.0% 70.0% 63.3% 70.0% 68.8% 70.0% 63.4% 70.0% 62.0%
 Expenditure per patient day equivalent (PDE) R 2 600 R 2 600 R 2 657 R 2 600 R 2 453 R 2 600 R 2 563 R 2 600 R 2 337
 Complaint Resolution within 25 working days rate 75.0% 75.0% 52.0% 75.0% 51.1% 75.0% 94.2% 75.0% 99.3%
 Mental health admission rate 1.0% 1.0% 0.9% 1.0% 0.9% 1.0% 1.0% 1.0% 1.0%
 Percentage of Hospitals that have conducted gap assessments for compliance against the National Core 100.0% 25.0% 25.0% 25.0% 0% 25.0% 25.0% 25.0% 0%
 Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards 50.0% 0% 0% 0% 0% 0% 0% 50.0% 0%

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Sector: Health

Programme / Subprogramme / Performance Measures

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QUARTERLY OUTPUTS									
Programme 5: Central Hospital Services									
Tertiary Hospitals									
Average Length of Stay	7.5 days	7.5 days	9.8 days	7.5 days	7.1 days	7.5 days	6.7 days	7.5 days	7.2 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	108.4%	75.0%	79.6%	75.0%	78.9%	75.0%	74.6%
Expenditure per patient day equivalent (PDE)	R 4 500	R 4 500	R 2 269	R 4 500	R 3 200	R 4 500	R 2 672	R 4 500	R 3 052
Complaint Resolution within 25 working days rate	75.0%	75.0%	80.0%	75.0%	64.3%	75.0%	37.5%	75.0%	100.0%
Mental health admission rate	1.0%	1.0%	0%	1.0%	0%	1.0%	0%	1.0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	0%	100.0%	100.0%	0%	0%	100.0%	0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%	0%	0%	0%	0%
Central Hospitals									
Average Length of Stay	8.0 days	8.0 days	7.3 days	8.0 days	6.8 days	8.0 days	6.8 days	8.0 days	7.0 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	75.3%	75.0%	80.7%	75.0%	70.5%	75.0%	68.1%
Expenditure per patient day equivalent (PDE)	R 4 900	R 4 900	R 4 988	R 4 900	R 4 002	R 4 900	R 5 333	R 4 900	R 4 980
Complaint Resolution within 25 working days rate	75.0%	75.0%	98.5%	75.0%	100.0%	75.0%	100.0%	75.0%	100.0%
Mental health admission rate	0%	0%	0%	0%	0%	0%	0%	0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	100.0%	0%	0%	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%	100.0%	0%	0%	0%
Programme 8: Health Facilities Management									
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	75.0%	0%	0%	0%	0%	0%	0%	75.0%	73.6%
Number of districts spending more than 90% of maintenance budget	5	-	-	-	-	-	-	5	-

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

Mr. G Mahlati Head Official: Provincial Treasury Free State

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th Quarter
GAUTENG

Sector: Health

Programme / Subprogramme / Performance Measures

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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 1: Administration									
Proportion of health facilities connected to the internet	44.0%	39.0%	44.1%	41.0%	44.1%	42.5%	44.1%	44.0%	44.1%
Programme 2: District Health Services									
PHC Utilisation rate	2.3	2.3	1.8	2.3	1.9	2.3	1.8	2.3	1.8
OHV registration visit coverage	5.0%	4.8%	107.0%	4.8%	209.3%	5.0%	59.3%	5.0%	7.7%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	100.0%	100.0%	83.5%	100.0%	84.8%	100.0%	83.3%	100.0%	83.2%
Complaint resolution within 25 working days rate	75.0%	75.0%	93.4%	75.0%	96.5%	75.0%	93.4%	75.0%	94.6%
Number of fully fledged District Clinical specialist Teams appointed	5	5	5	5	5	5	5	5	5
Number of fully-fledged Ward Based Outreach Teams appointed	140	128	144	134	195	138	192	140	199
School ISHP coverage	50.0%	50.0%	43.1%	50.0%	45.5%	50.0%	23.7%	50.0%	14.6%
School Grade 1 screening coverage	40.0%	10.0%	53.3%	12.0%	50.0%	40.0%	24.9%	40.0%	8.6%
School Grade 4 screening coverage	20.0%	20.0%	12.0%	20.0%	49.4%	20.0%	13.5%	20.0%	9.1%
School Grade 8 screening coverage	20.0%	20.0%	13.7%	20.0%	25.4%	20.0%	2.2%	20.0%	10.1%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Core	50.0%	50.0%	27.4%	50.0%	20.8%	50.0%	14.8%	50.0%	25.3%
Compliance Rate of PHC Facilities (of National Core Standards)	5.0%	5.0%	0%	5.0%	1.2%	5.0%	1.4%	5.0%	1.0%
District Hospitals									
Average Length of Stay	3.5 days	3.5 days	4.5 days	3.5 days	4.5 days	3.5 days	4.2 days	3.5 days	4.1 days
Inpatient Bed Utilisation Rate	75.0%	68.0%	60.9%	70.0%	62.4%	75.0%	58.2%	75.0%	58.5%
Expenditure per patient day equivalent (PDE)	R 1 600	R 1 600	R 2 479	R 1 600	R 2 310	R 1 600	R 2 300	R 1 600	R 2 295
Complaint Resolution within 25 working days rate	75.0%	75.0%	98.5%	75.0%	97.3%	75.0%	99.5%	75.0%	93.2%
Mental health admission rate	1.0%	1.0%	0.3%	1.0%	0.4%	1.0%	0.6%	1.0%	0.4%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	0%	27.3%	0%	18.2%	0%	18.2%	0%	100.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	3.0%	0%	0%	0%	0%	0%	0%	3.0%	27.3%
HIV and AIDS, TB and STI control									
Total clients remaining on ART (TROA) at end of the month	650 000	612 500	640 300	625 000	659 065	637 500	660 191	650 000	693 223
Number of Medical Male Circumcisions conducted	208 261	100 000	48 251	150 304	59 222	184 544	127 171	208 261	7 171
TB (new pulmonary) defaulter rate	5.0%	5.0%	4.6%	5.0%	4.6%	<5%	5.4%	<5%	5.4%
TB AFB sputum result turn-around time under 48 hours rate	80.0%	80.0%	65.5%	80.0%	65.1%	80.0%	71.0%	80.0%	71.0%
TB new client treatment success rate	85.0%	85.0%	85.9%	85.0%	85.9%	85.0%	86.0%	85.0%	86.0%
HIV testing coverage (15-49 Years - Annualised)	39.0%	39.0%	14.2%	39.0%	16.6%	39.0%	15.7%	39.0%	19.1%
TB (new pulmonary) cure rate	84.0%	84.0%	85.1%	84.0%	85.1%	84.0%	82.5%	84.0%	82.5%
TB MDR confirmed treatment initiation rate	65.0%	45.0%	50.2%	45.0%	50.2%	55.0%	60.5%	65.0%	60.5%
Maternal, child and women health									
Immunisation coverage under 1 year	90.0%	90.0%	104.6%	90.0%	105.9%	90.0%	107.5%	90.0%	107.0%
Vitamin A coverage 12-59 months	55.0%	55.0%	58.7%	55.0%	56.7%	55.0%	57.1%	55.0%	52.5%
Deworming 12-59 months coverage	55.0%	55.0%	46.7%	55.0%	41.0%	55.0%	31.9%	55.0%	27.2%
Child under 2 years underweight for age incidence	<2%	0.02	9.11	0.02	9.63	<2%	9.16	<2%	11.73
Measles 1st dose under 1 year coverage	90.0%	90.0%	106.3%	90.0%	109.6%	90.0%	111.4%	90.0%	108.4%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	90.0%	90.0%	103.0%	90.0%	106.7%	90.0%	108.7%	90.0%	107.4%
Rotavirus (RV) 2nd Dose Coverage	90.0%	90.0%	107.2%	90.0%	113.8%	90.0%	110.0%	90.0%	100.2%
Cervical cancer screening coverage	68.0%	68.0%	43.4%	68.0%	45.6%	68.0%	40.0%	68.0%	44.0%
HPV Vaccine Coverage amongst Grade 4 girls	80.0%	80.0%	0%	80.0%	0%	80.0%	87.2%	80.0%	0%
Antenatal 1st visits before 20 weeks rate	45.0%	45.0%	46.5%	45.0%	49.2%	45.0%	49.0%	45.0%	48.3%
Infant given NVP within 72 hours after birth uptake rate	95.0%	95.0%	98.0%	95.0%	91.6%	95.0%	95.9%	95.0%	90.7%
Infant 1st PCR Test positive around 6 weeks rate	<2%	2.0%	1.4%	2.0%	1.2%	<2%	1.3%	<2%	1.3%
Couple year protection rate	50.0%	50.0%	25.3%	50.0%	29.2%	50.0%	32.6%	50.0%	33.7%
Disease Prevention and Control									
Hypertension incidence	0.30	0.00	14.86	0.00	15.18	0.03	13.00	0.30	11.34
Diabetes incidence	0.30	0.00	2.23	0.00	3.43	0.30	2.60	0.30	3.94
Cataract surgery rate (Uninsured Population)	1300/ml	1300/ml	1 033.5	1300/ml	1 145.7	1300/ml	1 262.3	1300/ml	991.0
Programme 3: Emergency Medical Services									
EMS operational ambulance coverage	0.06	0.06	0.59	0.06	0.53	0.06	0.52	0.06	0.25
EMS P1 urban response under 15 minutes rate	65.0%	65.0%	78.9%	65.0%	80.7%	65.0%	78.1%	65.0%	79.0%
EMS P1 rural response under 40 minutes rate	100.0%	100.0%	76.2%	100.0%	76.9%	100.0%	83.1%	100.0%	88.2%
EMS P1 call response under 60 minutes rate	85.0%	85.0%	96.4%	85.0%	97.1%	85.0%	95.6%	85.0%	98.0%
Programme 4: Provincial Hospital Services									
General (regional) hospitals									
Average Length of Stay	4.7 days	4.7 days	4.9 days	4.7 days	5.1 days	4.7 days	5.2 days	4.7 days	4.7 days
Inpatient Bed Utilisation Rate	78.0%	78.0%	78.0%	78.0%	78.6%	78.0%	82.7%	78.0%	74.5%
Expenditure per patient day equivalent (PDE)	R 2 250	R 2 250	R 2 270	R 2 250	R 2 295	R 2 250	R 2 214	R 2 250	R 2 535
Complaint Resolution within 25 working days rate	95.0%	95.0%	100.0%	95.0%	99.4%	95.0%	100.0%	95.0%	99.6%
Mental health admission rate	2.0%	2.0%	0.2%	2.0%	0.2%	2.0%	0.2%	2.0%	0.3%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	0%	33.3%	0%	22.2%	0%	33.3%	100.0%	100.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	15.0%	0%	0%	0%	0%	7.0%	0%	15.0%	100.0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th Quarter

GAUTENG

Sector: Health

Programme / Subprogramme / Performance Measures

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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 5: Central Hospital Services									
Tertiary Hospitals									
Average Length of Stay	5.5 days	5.5 days	6.0 days	5.5 days	5.9 days	5.5 days	5.6 days	5.5 days	6.1 days
Inpatient Bed Utilisation Rate	78.0%	78.0%	83.2%	78.0%	85.0%	78.0%	80.4%	78.0%	101.8%
Expenditure per patient day equivalent (PDE)	R 3 800	R 3 800	R 2 560	R 3 800	R 2 363	R 3 800	R 2 391	R 3 800	R 2 983
Complaint Resolution within 25 working days rate	80.0%	80.0%	76.6%	80.0%	100.0%	80.0%	105.9%	80.0%	96.6%
Mental health admission rate	1.0%	1.0%	0.6%	1.0%	0.6%	1.0%	0.5%	1.0%	0.7%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	0%	33.3%	0%	66.7%	0%	33.3%	100.0%	100.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%	0%	0%	0%	0%
Central Hospitals									
Average Length of Stay	6.3 days	6.2 days	7.9 days	6.2 days	8.1 days	6.3 days	7.8 days	6.3 days	8.0 days
Inpatient Bed Utilisation Rate	78.0%	78.0%	80.2%	78.0%	81.5%	78.0%	78.3%	78.0%	76.1%
Expenditure per patient day equivalent (PDE)	R 3 800	R 3 800	R 3 971	R 3 800	R 3 439	R 3 800	R 3 462	R 3 800	R 3 507
Complaint Resolution within 25 working days rate	75.0%	0%	93.1%	0%	96.9%	0%	93.4%	75.0%	97.3%
Mental health admission rate	2.0%	2.0%	0%	2.0%	0%	2.0%	0%	2.0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	0%	25.0%	0%	50.0%	80.0%	25.0%	100.0%	100.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	25.0%	0%	0%	0%	0%	0%	0%	25.0%	100.0%
Programme 8: Health Facilities Management									
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	100.0%	25.0%	9.7%	50.0%	53.9%	75.0%	62.0%	100.0%	100.0%
Number of districts spending more than 90% of maintenance budget	5	5	-	5	-	5	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 - 4th 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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 1: Administration									
Proportion of health facilities connected to the internet	25.0%	8.0%	36.1%	15.0%	38.7%	20.0%	38.5%	25.0%	38.9%
Programme 2: District Health Services									
PHC Utilisation rate	3.0	3.0	2.9	3.0	2.8	3.0	2.8	3.0	2.8
OHV registration visit coverage	0%	0%	0%	0%	0%	0%	0%	0%	0%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	66.4%	64.0%	64.0%	65.0%	62.3%	66.0%	59.7%	66.4%	59.6%
Complaint resolution within 25 working days rate	70.0%	61.0%	93.7%	65.0%	92.5%	68.0%	85.7%	70.0%	89.5%
Number of fully fledged District Clinical specialist Teams appointed	4	1	4	1	-	1	-	1	-
Number of fully-fledged Ward Based Outreach Teams appointed	57	39	77	45	73	51	67	57	54
School ISHP coverage	70.0%	65.0%	39.6%	68.0%	32.0%	69.0%	9.6%	70.0%	11.9%
School Grade 1 screening coverage	establish baseline	establish baseline	37.9%	establish baseline	25.7%	establish baseline	8.5%	establish baseline	8.4%
School Grade 4 screening coverage	establish baseline	establish baseline	35.1%	establish baseline	24.0%	establish baseline	8.5%	establish baseline	9.0%
School Grade 8 screening coverage	establish baseline	establish baseline	18.6%	establish baseline	14.7%	establish baseline	1.4%	establish baseline	6.6%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Core Compliance Rate of PHC Facilities (of National Core Standards)	90.0%	85.0%	6.6%	87.0%	12.2%	89.0%	1.5%	90.0%	0.3%
	25.0%	0%	1.6%	15.0%	0.8%	20.0%	6.8%	25.0%	42.0%
District Hospitals									
Average Length of Stay	5.6 days	5.7 days	5.9 days	5.7 days	5.9 days	5.6 days	5.9 days	5.6 days	5.8 days
Inpatient Bed Utilisation Rate	63.8%	69.0%	62.4%	67.0%	65.5%	61.0%	63.8%	61.0%	62.3%
Expenditure per patient day equivalent (PDE)	R 2 038	R 1 985	R 2 004	R 1 990	R 1 940	R 2 000	R 2 064	R 2 038	R 2 086
Complaint Resolution within 25 working days rate	70.0%	65.0%	92.8%	67.0%	94.1%	69.0%	87.4%	70.0%	95.4%
Mental health admission rate	1.1%	1.0%	1.0%	1.0%	0.9%	1.0%	0.9%	1.0%	0.7%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	0%	7.5%	0%	15.0%	0%	2.5%	100.0%	2.5%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	10.0%	0%	0%	0%	0%	0%	0%	0%	0%
HIV and AIDS, TB and STI control									
Total clients remaining on ART (TROA) at end of the month	1 038 556	837 145	866 790	904 281	883 577	971 417	910 227	1 038 556	929 313
Number of Medical Male Circumcisions conducted	291 377	72 844	35 346	82 000	47 295	70 000	28 954	65 533	2 644
TB (new pulmonary) defaulter rate	4.5%	4.8%	3.8%	4.7%	3.5%	4.8%	3.8%	4.5%	4.1%
TB AFB sputum result turn-around time under 48 hours rate	80.0%	78.0%	82.5%	77.0%	85.0%	79.0%	82.4%	80.0%	80.0%
TB new client treatment success rate	85.0%	83.0%	86.3%	84.0%	81.6%	85.0%	86.6%	85.0%	86.3%
HIV testing coverage (15-49 Years - Annualised)	58.2%	39.0%	33.4%	43.0%	38.3%	50.0%	0%	58.2%	30.3%
TB (new pulmonary) cure rate	85.0%	81.0%	82.8%	83.0%	83.0%	84.0%	83.8%	85.0%	83.2%
TB MDR confirmed treatment initiation rate	57.8%	53.5%	0%	55.0%	0%	56.5%	0%	57.8%	0%
Maternal, child and women health									
Immunisation coverage under 1 year	96.0%	95.8%	86.3%	95.8%	92.8%	95.9%	85.2%	96.0%	85.1%
Vitamin A coverage 12-59 months	55.0%	54.0%	49.3%	54.0%	63.8%	55.0%	47.6%	55.0%	48.9%
Deworming 12-59 months coverage	determine baseline	determine baseline	45.3%	determine base	57.1%	determine baseline	41.3%	Baseline determined	35.0%
Child under 2 years underweight for age incidence	20.00	23.00	0.03	22.00	0.03	21.00	0.04	20.00	0.04
Measles 1st dose under 1 year coverage	94.6%	93.5%	88.4%	94.0%	93.8%	94.2%	87.5%	94.6%	87.9%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	96.2%	95.1%	88.6%	95.7%	93.3%	96.0%	87.7%	96.2%	87.6%
Rote Virus (RV) 2nd Dose Coverage	104.4%	103.7%	90.5%	104.0%	100.1%	104.1%	93.6%	104.4%	81.0%
Cervical cancer screening coverage	79.7%	79.2%	68.0%	79.4%	79.2%	66.9%	79.7%	79.7%	57.5%
HPV Vaccine Coverage amongst Grade 4 girls	determine baseline	determine baseline	0%	determine base	82.9%	determine baseline	0%	Baseline determined	101.5%
Antenatal 1st visits before 20 weeks rate	60.0%	55.0%	52.8%	57.0%	59.2%	59.0%	58.4%	60.0%	57.1%
Infant given NVP within 72 hours after birth uptake rate	98.0%	98.0%	99.4%	98.0%	100.8%	98.0%	97.6%	98.0%	98.0%
Infant 1st PCR Test positive around 6 weeks rate	1.2%	1.7%	1.3%	1.4%	1.2%	1.2%	1.4%	1.2%	1.4%
Couple year protection rate	45.0%	40.0%	52.3%	43.0%	54.1%	44.0%	0%	45.0%	36.4%
Disease Prevention and Control									
Hypertension incidence	22.80	23.00	0.02	23.00	0.02	22.90	-	22.80	0.01
Diabetes incidence	2.10	2.10	0.01	2.10	0.01	2.10	-	2.10	0.00
Cataract surgery rate (Uninsured Population)	749.0	678.0	910.9	688.0	977.0	701.0	-	749.0	845.2
Programme 3: Emergency Medical Services									
EMS operational ambulance coverage	0.26	0.26	0.17	0.26	0.19	0.26	0.19	0.26	0.18
EMS P1 urban response under 15 minutes rate	15.0%	10.0%	4.9%	10.0%	5.2%	15.0%	5.3%	15.0%	4.9%
EMS P1 rural response under 40 minutes rate	40.0%	30.0%	31.5%	35.0%	30.3%	40.0%	32.1%	40.0%	32.2%
EMS P1 call response under 60 minutes rate	65.0%	50.0%	42.8%	55.0%	40.5%	65.0%	41.6%	65.0%	40.1%
Programme 4: Provincial Hospital Services									
General (regional) hospitals									
Average Length of Stay	5.3 days	5.9 days	6.1 days	5.7 days	6.0 days	5.5 days	6.1 days	5.3 days	6.0 days
Inpatient Bed Utilisation Rate	76.5%	75.0%	73.3%	75.5%	76.5%	76.0%	71.8%	76.5%	71.7%
Expenditure per patient day equivalent (PDE)	R 2 241	R 2 195	R 2 487	R 2 150	R 2 311	R 2 200	R 2 463	R 2 241	R 2 399
Complaint Resolution within 25 working days rate	70.0%	63.0%	94.5%	66.0%	98.8%	68.0%	98.8%	70.0%	90.5%
Mental health admission rate	1.4%	1.2%	1.1%	1.2%	1.1%	1.3%	1.0%	1.4%	1.1%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	50.0%	15.4%	75.0%	7.7%	90.0%	7.7%	100.0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	23.0%	0%	0%	0%	0%	0%	0%	23.0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th Quarter
KWAZULU-NATAL

Sector: Health

Programme / Subprogramme / Performance Measures

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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 5: Central Hospital Services									
Tertiary Hospitals									
Average Length of Stay	9.3 days	10.0 days	9.9 days	9.7 days	9.7 days	9.5 days	9.2 days	9.3 days	10.3 days
Inpatient Bed Utilisation Rate	75.0%	60.0%	83.4%	65.0%	86.5%	70.0%	78.9%	75.0%	82.8%
Expenditure per patient day equivalent (PDE)	R 4 841	R 4 790	R 5 147	R 4 795	R 7 285	R 4 800	R 8 468	R 4 841	R 6 933
Complaint Resolution within 25 working days rate	90.0%	90.0%	0%	90.0%	0%	90.0%	0%	90.0%	0%
Mental health admission rate	1.6%	1.5%	0%	1.5%	0%	1.5%	0%	1.6%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	0%	100.0%	0%	100.0%	0%	100.0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%	0%	0%	0%	0%
Central Hospitals									
Average Length of Stay	7.8 days	8.4 days	-	8.1 days	-	7.9 days	-	7.8 days	-
Inpatient Bed Utilisation Rate	71.9%	71.8%	0%	71.8%	0%	71.9%	0%	71.9%	0%
Expenditure per patient day equivalent (PDE)	R 3 083	R 3 003	R 0	R 3 033	R 0	R 3 073	R 0	R 3 083	R 0
Complaint Resolution within 25 working days rate	85.0%	85.0%	0%	85.0%	0%	85.0%	0%	85.0%	0%
Mental health admission rate	0%	0%	0%	0%	0%	0%	0%	0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	0%	100.0%	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%	0%	0%	100.0%	0%
Programme 8: Health Facilities Management									
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	11.0%	0%	0%	0%	0%	0%	0%	11.0%	0%
Number of districts spending more than 90% of maintenance budget	11	-	-	-	-	-	-	11	-

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

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

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th 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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 1: Administration									
Proportion of health facilities connected to the internet	0%	0%	8.1%	0%	8.1%	0%	0%	0%	0%
Programme 2: District Health Services									
PHC Utilisation rate	2.7	2.7	2.6	2.7	2.6	2.7	2.5	2.7	3.9
OHH registration visit coverage	12.0%	12.0%	87.3%	12.0%	64.1%	12.0%	0%	12.0%	0%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	90.0%	90.0%	87.7%	90.0%	86.8%	90.0%	77.2%	90.0%	122.9%
Complaint resolution within 25 working days rate	68.0%	68.0%	84.7%	68.0%	92.4%	68.0%	93.3%	68.0%	89.4%
Number of fully fledged District Clinical specialist Teams appointed	1	1	-	1	-	1	-	1	-
Number of fully fledged Ward Based Outreach Teams appointed	75	75	91	75	91	75	-	75	-
School SHP coverage	10.0%	0%	9 929.2%	0%	14 180.1%	0%	0%	10.0%	0%
School Grade 1 screening coverage	10.0%	0%	29.9%	0%	38.0%	0%	0%	10.0%	0%
School Grade 4 screening coverage	20.0%	0%	15.4%	0%	27.9%	0%	0%	20.0%	0%
School Grade 8 screening coverage	20.0%	0%	6.7%	0%	11.6%	0%	0%	20.0%	0%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Core	36.0%	0%	5.8%	0%	16.6%	0%	0%	36.0%	0%
Compliance Rate of PHC Facilities (of National Core Standards)	0%	0%	55.9%	0%	104.3%	0%	0%	0%	0%
District Hospitals									
Average Length of Stay	4.4 days	4.4 days	4.4 days	4.4 days	4.3 days	4.4 days	-	4.4 days	4.2 days
Inpatient Bed Utilisation Rate	70.0%	70.0%	67.7%	70.0%	71.2%	70.0%	68.8%	70.0%	101.6%
Expenditure per patient day equivalent (PDE)	R 2 100	R 2 100	R 2 615	R 2 100	R 2 442	R 2 100	R 4 704	R 2 100	R 1 716
Complaint Resolution within 25 working days rate	80.0%	80.0%	95.9%	80.0%	99.6%	80.0%	100.8%	80.0%	129.9%
Mental health admission rate	0%	0%	1.9%	0%	1.9%	0%	36.0%	0%	1.7%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	20.0%	16.7%	50.0%	50.0%	75.0%	70.0%	100.0%	100.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%	0%	100.0%	0%	100.0%
HIV and AIDS, TB and STI control									
Total clients remaining on ART (TROA) at end of the month	190 000	188 000	194 118	189 000	200 478	190 000	213 957	190 000	231 997
Number of Medical Male Circumcisions conducted	62 000	3 000	9 796	62 000	19 582	3 000	4 227	3 000	3 212
TB (new pulmonary) defaulter rate	<5%	<5%	4.2%	<5%	5.1%	<5%	5.5%	<5%	0.5%
TB AFB sputum result turn-around time under 48 hours rate	32.0%	32.0%	50.8%	32.0%	64.5%	32.0%	62.0%	32.0%	71.6%
TB new client treatment success rate	60.0%	60.0%	76.2%	60.0%	75.8%	60.0%	74.8%	60.0%	79.2%
HIV testing coverage (15-49 Years - Annualised)	99.0%	99.0%	37.5%	99.0%	41.3%	99.0%	36.4%	99.0%	5.8%
TB (new pulmonary) cure rate	75.0%	75.0%	72.4%	75.0%	70.1%	75.0%	70.2%	75.0%	73.2%
TB MDR confirmed treatment initiation rate	47.0%	47.0%	100.0%	47.0%	94.0%	47.0%	98.7%	47.0%	96.1%
Maternal, child and women health									
Immunisation coverage under 1 year	90.0%	90.0%	77.1%	90.0%	79.7%	90.0%	83.8%	90.0%	0%
Vitamin A coverage 12-59 months	40.0%	40.0%	36.4%	40.0%	44.1%	40.0%	39.2%	40.0%	0%
Deworming 12-59 months coverage	90.0%	90.0%	28.7%	90.0%	19.6%	90.0%	7.7%	90.0%	0%
Child under 2 years underweight for age incidence	0.44	0.44	24.48	0.44	25.60	0.44	26.40	0.44	-
Measles 1st dose under 1 year coverage	90.0%	90.0%	89.4%	90.0%	88.8%	90.0%	91.7%	90.0%	0%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	90.0%	90.0%	86.8%	90.0%	90.3%	90.0%	90.0%	90.0%	0%
Rotavirus (RV) 2nd Dose Coverage	90.0%	90.0%	90.2%	90.0%	100.1%	90.0%	94.2%	90.0%	0%
Cervical cancer screening coverage	55.0%	55.0%	46.7%	55.0%	56.0%	55.0%	41.2%	55.0%	0%
HPV Vaccine Coverage amongst Grade 4 girls	60.0%	0%	50.5%	0%	86.9%	60.0%	0%	0%	0%
Antenatal 1st visits before 20 weeks rate	45.0%	45.0%	45.4%	45.0%	53.1%	45.0%	57.8%	45.0%	52.6%
Infant given NVP within 72 hours after birth uptake rate	50.0%	50.0%	98.9%	50.0%	98.8%	50.0%	98.3%	50.0%	97.9%
Infant 1st PCR Test positive around 6 weeks rate	< 2	< 2	2.1%	< 2	2.4%	< 2	2.5%	< 2	1.9%
Couple year protection rate	45.0%	45.0%	33.9%	45.0%	40.6%	45.0%	3 712.0%	45.0%	0%
Disease Prevention and Control									
Hypertension incidence	0.16	-	15.76	-	13.38	-	13.86	0.16	-
Diabetes incidence	0.02	-	10.82	-	10.94	-	10.80	0.02	-
Cataract surgery rate (Uninsured Population)	1 000.0	1 000.0	537.5	1 000.0	777.6	1 000.0	1 020.7	1 000.0	-
Programme 3: Emergency Medical Services									
EMS operational ambulance coverage	0.30	0.30	0.16	0.30	1.15	0.30	0.59	0.00	0.39
EMS P1 urban response under 15 minutes rate	50.0%	50.0%	56.7%	50.0%	46.4%	50.0%	37.8%	50.0%	28.6%
EMS P1 rural response under 40 minutes rate	53.0%	53.0%	80.1%	53.0%	164.8%	53.0%	261.1%	53.0%	3 160.1%
EMS P1 call response under 60 minutes rate	55.0%	55.0%	62.6%	55.0%	259.1%	55.0%	70.0%	55.0%	281.7%
Programme 4: Provincial Hospital Services									
General (regional) hospitals									
Average Length of Stay	5.0 days	5.0 days	5.6 days	5.0 days	5.4 days	5.0 days	5.0 days	5.0 days	5.0 days
Inpatient Bed Utilisation Rate	65.0%	65.0%	71.5%	65.0%	72.7%	65.0%	67.9%	65.0%	90.0%
Expenditure per patient day equivalent (PDE)	R 2 544	R 2 544	R 2 470	R 2 544	R 2 249	R 2 544	R 2 537	R 2 544	R 1 880
Complaint Resolution within 25 working days rate	80.0%	80.0%	100.0%	80.0%	100.0%	80.0%	100.0%	80.0%	137.5%
Mental health admission rate	0%	0%	2.1%	0%	2.4%	0%	1.9%	0%	2.3%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	20.0%	100.0%	60.0%	100.0%	80.0%	100.0%	100.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%	0%	100.0%	0%	100.0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th Quarter

LIMPOPO

Sector: Health

Programme / Subprogramme / Performance Measures

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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 5: Central Hospital Services									
Tertiary Hospitals									
Average Length of Stay	7.0 days	7.0 days	7.3 days	7.0 days	7.1 days	7.0 days	6.7 days	7.0 days	6.8 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	74.0%	75.0%	77.3%	75.0%	74.9%	75.0%	110.4%
Expenditure per patient day equivalent (PDE)	R 3 500	R 3 500	R 3 466	R 3 500	R 3 438	R 3 500	R 3 772	R 3 500	R 4 380
Complaint Resolution within 25 working days rate	90.0%	90.0%	100.0%	90.0%	100.0%	90.0%	100.0%	90.0%	100.0%
Mental health admission rate	0%	0%	0.7%	0%	0.8%	0%	1.1%	0%	1.1%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	0%	100.0%	0%	100.0%	50.0%	100.0%	100.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%	0%	100.0%	0%	100.0%
Central Hospitals									
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 Core									
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards									
Programme 8: Health Facilities Management									
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	3.7%	3.7%	20.8%	3.7%	13.6%	3.7%	0%	3.7%	0%
Number of districts spending more than 90% of maintenance budget	5	5	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 - 4th 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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 1: Administration									
Proportion of health facilities connected to the internet	50.0%	0%	25.0%	0%	25.0%	0%	25.0%	50.0%	25.0%
Programme 2: District Health Services									
PHC Utilisation rate	3.0	3.0	2.3	3.0	2.3	3.0	2.1	3.0	2.2
OHH registration visit coverage	0%	0%	16.9%	0%	32.3%	0%	7.1%	0%	9.1%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	90.0%	90.0%	83.2%	90.0%	86.1%	90.0%	83.2%	90.0%	78.0%
Complaint resolution within 25 working days rate	78.0%	78.0%	76.8%	78.0%	96.4%	78.0%	94.3%	78.0%	202.2%
Number of fully fledged District Clinical specialist Teams appointed	2	-	1	1	-	1	-	-	-
Number of fully fledged Ward Based Outreach Teams appointed	10	-	44	-	52	-	52	10	61
School ISHP coverage	25.0%	25.0%	25.8%	25.0%	35.0%	25.0%	10.1%	25.0%	13.8%
School Grade 1 screening coverage	20.0%	20.0%	7.0%	20.0%	13.9%	20.0%	3.3%	20.0%	3.5%
School Grade 4 screening coverage	15.0%	15.0%	7.3%	15.0%	9.1%	15.0%	6.3%	15.0%	1.8%
School Grade 6 screening coverage	5.0%	5.0%	2.6%	5.0%	6.6%	5.0%	0%	5.0%	0.4%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	0%	100.0%	51.6%	100.0%	84.9%	100.0%	84.9%
Compliance Rate of PHC Facilities (of National Core Standards)	80.0%	80.0%	0%	80.0%	0%	80.0%	0%	80.0%	0%
District Hospitals									
Average Length of Stay	4.0 days	40.0 days	4.3 days	40.0 days	4.3 days	40.0 days	4.4 days	40.0 days	4.3 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	70.2%	75.0%	72.7%	75.0%	71.4%	75.0%	70.2%
Expenditure per patient day equivalent (PDE)	R 1 500	R 1 500	R 2 172	R 1 500	R 1 797	R 1 500	R 1 917	R 1 500	R 1 885
Complaint Resolution within 25 working days rate	70.0%	70.0%	99.3%	70.0%	96.9%	70.0%	98.3%	70.0%	97.4%
Mental health admission rate	75.0%	75.0%	0.8%	75.0%	1.0%	75.0%	1.0%	75.0%	0.9%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	0%	0%	0%	52.2%	0%	95.7%	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%	100.0%	0%	0%	0%
HIV and AIDS, TB and STI control									
Total clients remaining on ART (TROA) at end of the month	309 071	253 199	248 121	271 823	260 676	290 447	265 685	309 071	277 376
Number of Medical Male Circumcisions conducted	80 000	5 000	16 386	30 000	18 074	15 000	5 295	15 000	3 304
TB (new pulmonary) defaulter rate	<6%	0%	0%	0%	5.0%	0%	3.8%	0%	4.7%
TB AFB sputum result turn-around time under 48 hours rate	95.0%	95.0%	62.8%	95.0%	62.2%	95.0%	62.2%	95.0%	58.4%
TB new client treatment success rate	100.0%	0%	76.0%	0%	69.4%	0%	71.2%	100.0%	746.2%
HIV testing coverage (15-49 Years - Annualised)	30.0%	30.0%	25.1%	30.0%	26.7%	30.0%	25.3%	30.0%	28.6%
TB (new pulmonary) cure rate	80.0%	0%	71.2%	0%	63.9%	0%	66.5%	80.0%	69.3%
TB MDR confirmed treatment initiation rate	90.0%	90.0%	99.7%	90.0%	99.7%	90.0%	99.7%	90.0%	98.9%
Maternal, child and women health									
Immunisation coverage under 1 year	90.0%	90.0%	74.1%	90.0%	77.2%	90.0%	78.7%	90.0%	82.1%
Vitamin A coverage 12-59 months	50.0%	45.0%	30.7%	47.0%	36.2%	48.0%	35.3%	50.0%	39.9%
Deworming 12-59 months coverage	30.0%	22.0%	15.4%	25.0%	17.5%	28.0%	12.6%	30.0%	16.1%
Child under 2 years underweight for age incidence	0.16	0.17	6.27	0.17	6.07	0.16	4.42	0.16	8.38
Measles 1st dose under 1 year coverage	90.0%	90.0%	80.1%	90.0%	80.5%	90.0%	82.8%	90.0%	85.8%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	90.0%	90.0%	79.4%	90.0%	80.5%	90.0%	80.3%	90.0%	83.3%
Rotavirus (RV) 2nd Dose Coverage	90.0%	90.0%	85.4%	90.0%	95.0%	90.0%	89.7%	90.0%	131.4%
Cervical cancer screening coverage	70.0%	70.0%	59.2%	70.0%	68.7%	70.0%	55.4%	70.0%	61.6%
HPV Vaccine Coverage amongst Grade 4 girls	80.0%	80.0%	0%	80.0%	0%	80.0%	0%	80.0%	0%
Antenatal 1st visits before 20 weeks rate	43.0%	43.0%	53.8%	43.0%	57.6%	43.0%	57.4%	43.0%	39.8%
Infant given NVP within 72 hours after birth uptake rate	100.0%	100.0%	100.4%	100.0%	100.0%	100.0%	98.6%	100.0%	98.9%
Infant 1st PCR Test positive around 6 weeks rate	<2%	<2%	2.0%	<2%	1.7%	<2%	1.6%	<2%	1.5%
Couple year protection rate	41.0%	0%	35.2%	0%	40.1%	0%	65.2%	41.0%	61.6%
Disease Prevention and Control									
Hypertension incidence	0.15	0.15	14.42	0.15	14.55	0.15	11.57	0.15	10.69
Diabetes incidence	0.15	0.15	5.44	0.15	5.63	0.15	5.49	0.15	0.08
Cataract surgery rate (Uninsured Population)	1 000.0	167.0	723.4	333.0	695.9	333.0	805.9	167.0	1 092.3
Programme 3: Emergency Medical Services									
EMS operational ambulance coverage	0.00	0.00	0.23	0.00	0.23	0.03	0.23	0.00	0.23
EMS P1 urban response under 15 minutes rate	85.0%	85.0%	67.4%	85.0%	70.5%	85.0%	74.9%	85.0%	73.7%
EMS P1 rural response under 40 minutes rate	75.0%	75.0%	64.8%	75.0%	63.6%	75.0%	69.7%	75.0%	67.9%
EMS P1 call response under 60 minutes rate	75.0%	75.0%	72.0%	75.0%	69.0%	75.0%	64.5%	75.0%	63.0%
Programme 4: Provincial Hospital Services									
General (regional) hospitals									
Average Length of Stay	4.7 days	4.7 days	5.2 days	4.7 days	4.8 days	4.7 days	4.4 days	4.7 days	4.2 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	79.5%	75.0%	80.5%	75.0%	75.8%	75.0%	74.7%
Expenditure per patient day equivalent (PDE)	R 2 332	R 2 000	R 2 895	R 2 664	R 2 148	R 2 664	R 2 516	R 2 000	R 2 708
Complaint Resolution within 25 working days rate	80.0%	80.0%	77.4%	80.0%	95.0%	80.0%	89.5%	80.0%	93.6%
Mental health admission rate	80.0%	0%	0.9%	0%	0.9%	0%	1.1%	80.0%	0.9%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	66.7%	100.0%	66.7%	100.0%	66.7%	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%	0%	0%	0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th Quarter
MPUMALANGA

Sector: Health

Programme / Subprogramme / Performance Measures

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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 5: Central Hospital Services									
Tertiary Hospitals									
Average Length of Stay	5.3 days	5.3 days	6.7 days	5.3 days	6.8 days	5.3 days	6.8 days	5.3 days	7.3 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	81.1%	75.0%	85.8%	75.0%	79.6%	0%	85.1%
Expenditure per patient day equivalent (PDE)	R 2 867	R 2 367	R 4 963	R 3 367	R 3 645	R 3 367	R 0	R 2 367	R 0
Complaint Resolution within 25 working days rate	80.0%	90.0%	0%	90.0%	0%	90.0%	0%	90.0%	0%
Mental health admission rate	80.0%	0%	0%	0%	0%	0%	0%	80.0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	0%	100.0%	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%	100.0%	0%	100.0%	0%
Central Hospitals									
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 Core									
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards									
Programme 8: Health Facilities Management									
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	25.0%	25.0%	0%	25.0%	0%	25.0%	0%	25.0%	0%
Number of districts spending more than 90% of maintenance budget	3	3	-	3	-	3	-	3	-

1. Information submitted by: Dr A M Morake 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 - 4th 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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 1: Administration									
Proportion of health facilities connected to the internet	100.0%	100.0%	9.0%	100.0%	9.0%	100.0%	9.0%	100.0%	9.0%
Programme 2: District Health Services									
PHC Utilisation rate	3.5	3.5	2.8	3.5	2.9	3.5	2.7	3.5	2.8
OHV registration visit coverage	60.0%	60.0%	1.0%	60.0%	0.7%	60.0%	1.3%	60.0%	0.6%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	80.0%	80.0%	49.6%	80.0%	68.9%	80.0%	67.5%	80.0%	61.6%
Complaint resolution within 25 working days rate	60.0%	60.0%	103.1%	60.0%	100.0%	60.0%	105.0%	60.0%	128.6%
Number of fully fledged District Clinical specialist Teams appointed	1	1	15	1	-	1	5	1	5
Number of fully-fledged Ward Based Outreach Teams appointed	30	30	35	30	-	30	35	30	35
School ISHP coverage	30.0%	10.0%	88.2%	15.0%	24.4%	20.0%	27.9%	30.0%	60.5%
School Grade 1 screening coverage	25.0%	7.0%	44.2%	10.0%	20.7%	15.0%	11.9%	25.0%	22.6%
School Grade 4 screening coverage	20.0%	5.0%	21.4%	10.0%	36.0%	15.0%	12.1%	20.0%	24.4%
School Grade 8 screening coverage	20.0%	5.0%	12.3%	10.0%	47.8%	15.0%	1.8%	20.0%	6.6%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	79.3%	100.0%	80.0%	100.0%	100.0%	100.0%	0%
Compliance Rate of PHC Facilities (of National Core Standards)	21.0%	9.0%	0.4%	11.0%	0.5%	14.0%	0.4%	21.0%	0%
District Hospitals									
Average Length of Stay	3.5 days	3.5 days	3.4 days	3.5 days	3.5 days	3.5 days	3.5 days	3.5 days	3.7 days
Inpatient Bed Utilisation Rate	70.0%	70.0%	57.6%	70.0%	61.7%	70.0%	61.1%	70.0%	62.1%
Expenditure per patient day equivalent (PDE)	R 1 631	R 1 631	R 2 494	R 1 631	R 2 240	R 1 631	R 2 376	R 1 631	R 1 957
Complaint Resolution within 25 working days rate	60.0%	60.0%	89.5%	60.0%	92.3%	60.0%	100.0%	60.0%	95.7%
Mental health admission rate	0.5%	0.5%	0.2%	0.5%	0.8%	0.5%	0.8%	0.5%	0.7%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	72.7%	100.0%	72.7%	100.0%	100.0%	100.0%	100.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	9.0%	9.0%	0%	9.0%	0%	9.0%	0%	9.0%	0%
HIV and AIDS, TB and STI control									
Total clients remaining on ART (TROA) at end of the month	44 959	40 826	37 520	42 203	39 617	43 580	40 981	44 959	39 815
Number of Medical Male Circumcisions conducted	32 615	8 154	1 516	8 154	2 005	8 154	1 347	8 153	1 135
TB (new pulmonary) defaulter rate	5.0%	5.0%	7.5%	5.0%	5.0%	5.0%	7.6%	5.0%	6.9%
TB AFB sputum result turn-around time under 48 hours rate	68.0%	62.0%	63.0%	64.0%	51.9%	66.0%	52.9%	68.0%	50.8%
TB new client treatment success rate	90.0%	84.0%	77.0%	86.0%	38.4%	88.0%	73.1%	90.0%	66.5%
HIV testing coverage (15-49 Years - Annualised)	49.5%	32.0%	18.2%	38.0%	23.3%	43.0%	26.5%	49.5%	36.1%
TB (new pulmonary) cure rate	80.0%	80.0%	67.6%	80.0%	34.6%	80.0%	61.1%	80.0%	58.9%
TB MDR confirmed treatment initiation rate	100.0%	100.0%	183.9%	100.0%	103.0%	100.0%	99.1%	100.0%	86.5%
Maternal, child and women health									
Immunisation coverage under 1 year	98.0%	98.0%	83.9%	98.0%	77.8%	98.0%	87.3%	98.0%	88.5%
Vitamin A coverage 12-59 months	40.0%	37.0%	31.2%	38.0%	36.7%	39.0%	39.6%	40.0%	35.1%
Deworming 12-59 months coverage	30.0%	30.0%	26.8%	30.0%	32.7%	30.0%	32.4%	30.0%	30.3%
Child under 2 years underweight for age incidence	0.10	0.10	46.14	0.10	48.08	0.10	48.50	0.10	59.00
Measles 1st dose under 1 year coverage	98.0%	98.0%	84.4%	98.0%	78.5%	98.0%	89.3%	98.0%	89.1%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	95.0%	95.0%	85.1%	95.0%	82.3%	95.0%	88.7%	95.0%	89.6%
Rotavirus (RV) 2nd Dose Coverage	95.0%	95.0%	89.0%	95.0%	94.7%	95.0%	91.4%	95.0%	84.4%
Cervical cancer screening coverage	50.0%	50.0%	30.0%	50.0%	33.2%	50.0%	25.3%	50.0%	30.6%
HPV Vaccine Coverage amongst Grade 4 girls	80.0%	80.0%	85.8%	80.0%	127.8%	80.0%	79.4%	80.0%	79.4%
Antenatal 1st visits before 20 weeks rate	60.0%	60.0%	38.2%	60.0%	58.2%	60.0%	59.3%	60.0%	47.6%
Infant given NVP within 72 hours after birth uptake rate	95.0%	92.0%	99.7%	93.0%	101.2%	94.0%	99.0%	95.0%	99.6%
Infant 1st PCR Test positive around 6 weeks rate	2.5%	2.5%	2.3%	2.5%	1.4%	2.5%	2.0%	2.5%	1.9%
Couple year protection rate	40.0%	40.0%	32.2%	40.0%	37.5%	40.0%	37.4%	40.0%	35.1%
Disease Prevention and Control									
Hypertension incidence	17 / 1000	17 / 1000	18.24	17 / 1000	20.21	17 / 1000	15.80	17 / 1000	14.88
Diabetes incidence	2.9 / 1000	2.9 / 1000	12.51	2.9 / 1000	15.69	2.9 / 1000	16.58	2.9 / 1000	9.04
Cataract surgery rate (Uninsured Population)	1200/1000000	1200/1000000	552.8	1200/1000000	1 050.8	1200/1000000	1 121.4	1200/1000000	1 041.0
Programme 3: Emergency Medical Services									
EMS operational ambulance coverage	0.50	0.50	0.97	0.50	0.81	0.50	0.92	0.50	0.89
EMS P1 urban response under 15 minutes rate	60.0%	60.0%	59.0%	60.0%	59.4%	60.0%	54.6%	60.0%	57.0%
EMS P1 rural response under 40 minutes rate	40.0%	40.0%	54.9%	40.0%	53.1%	40.0%	59.4%	40.0%	49.6%
EMS P1 call response under 60 minutes rate	60.0%	60.0%	48.8%	60.0%	36.1%	60.0%	62.3%	60.0%	68.9%
Programme 4: Provincial Hospital Services									
General (regional) hospitals									
Average Length of Stay	4.8 days	4.8 days	4.1 days	4.8 days	4.0 days	4.8 days	4.1 days	4.8 days	4.5 days
Inpatient Bed Utilisation Rate	72.0%	72.0%	72.0%	72.0%	101.6%	72.0%	86.2%	72.0%	96.5%
Expenditure per patient day equivalent (PDE)	R 1 986	R 1 986	R 2 748	R 1 986	R 2 630	R 1 986	R 2 752	R 1 986	R 2 066
Complaint Resolution within 25 working days rate	60.0%	60.0%	0%	60.0%	100.0%	60.0%	100.0%	60.0%	31.3%
Mental health admission rate	1.0%	1.0%	0.9%	1.0%	0.7%	1.0%	1.5%	1.0%	1.7%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	100.0%	100.0%	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%	100.0%	0%	100.0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th 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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 5: Central Hospital Services									
Tertiary Hospitals									
Average Length of Stay	5.5 days	5.5 days	6.5 days	5.5 days	6.7 days	5.5 days	7.0 days	5.5 days	7.4 days
Inpatient Bed Utilisation Rate	74.0%	74.0%	70.9%	74.0%	73.6%	74.0%	73.1%	74.0%	72.9%
Expenditure per patient day equivalent (PDE)	R 3 663	R 3 663	R 4 051	R 3 663	R 3 585	R 3 663	R 3 203	R 3 663	R 3 316
Complaint Resolution within 25 working days rate	60.0%	60.0%	100.0%	60.0%	83.8%	60.0%	82.4%	60.0%	80.0%
Mental health admission rate	2.3%	2.3%	0.6%	2.3%	2.2%	2.3%	2.4%	2.3%	1.3%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	0%	100.0%	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%	100.0%	0%	100.0%	0%
Central Hospitals									
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 Core									
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards									
Programme 8: Health Facilities Management									
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	18.0%	2.0%	36.3%	5.0%	75.6%	10.0%	41.5%	18.0%	14.2%
Number of districts spending more than 90% of maintenance budget	5	1	-	2	-	3	-	5	-

1. Information submitted by: Ms. G Mallsigane 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 - 4th Quarter

NORTH WEST

Sector: Health

Programme / Subprogramme / Performance Measures

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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 1: Administration									
Proportion of health facilities connected to the internet	21.0%	0%	37.4%	18.0%	34.3%	0%	34.3%	21.0%	34.3%
Programme 2: District Health Services									
PHC Utilisation rate	3.5	3.5	2.3	3.5	2.4	3.5	2.2	3.5	2.3
OHV registration visit coverage	36.0%	9.0%	1.6%	9.0%	0.9%	9.0%	0.7%	9.0%	0.4%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	80.0%	73.0%	23.5%	76.0%	26.0%	78.0%	77.0%	80.0%	81.3%
Complaint resolution within 25 working days rate	80.0%	78.0%	97.6%	80.0%	98.0%	80.0%	101.9%	80.0%	95.8%
Number of fully fledged District Clinical specialist Teams appointed	5	5	-	5	-	5	-	5	-
Number of fully-fledged Ward Based Outreach Teams appointed	296	74	-	74	-	74	-	74	-
School ISHP coverage	80.0%	20.0%	42.9%	20.0%	67.2%	20.0%	24.6%	20.0%	39.9%
School Grade 1 screening coverage	70.0%	20.0%	43.1%	20.0%	60.9%	10.0%	27.0%	20.0%	30.0%
School Grade 4 screening coverage	70.0%	20.0%	20.7%	20.0%	37.7%	10.0%	15.6%	20.0%	24.5%
School Grade 8 screening coverage	80.0%	15.0%	9.1%	15.0%	33.5%	10.0%	5.6%	10.0%	10.2%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	5.0%	100.0%	4.4%	100.0%	65.6%	100.0%	100.0%
Compliance Rate of PHC Facilities (of National Core Standards)	100.0%	25.0%	3.1%	25.0%	4.7%	25.0%	0.8%	25.0%	0.8%
District Hospitals									
Average Length of Stay	3.8 days	3.8 days	4.8 days	3.8 days	4.7 days	3.8 days	4.6 days	3.8 days	4.8 days
Inpatient Bed Utilisation Rate	65.0%	65.0%	62.5%	65.0%	64.9%	65.0%	62.2%	65.0%	63.0%
Expenditure per patient day equivalent (PDE)	R 2 300	R 2 300	R 2 402	R 2 300	R 2 440	R 2 300	R 2 378	R 2 300	R 3 068
Complaint Resolution within 25 working days rate	80.0%	80.0%	97.4%	80.0%	100.0%	80.0%	97.8%	80.0%	79.7%
Mental health admission rate	1.2%	1.2%	0.6%	1.2%	0.7%	1.2%	4.7%	1.2%	5.2%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	20.0%	100.0%	40.0%	100.0%	100.0%	100.0%	100.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	27.0%	7.0%	0%	7.0%	0%	7.0%	0%	6.0%	0%
HIV and AIDS, TB and STI control									
Total clients remaining on ART (TROA) at end of the month	226 735	214 184	192 169	218 368	192 565	222 552	171 425	226 735	162 541
Number of Medical Male Circumcisions conducted	50 135	12 533	16 899	12 534	17 947	12 534	3 049	12 534	1 811
TB (new pulmonary) defaulter rate	<5%	<5%	2.7%	<5%	2.8%	<5%	6.9%	<5%	5.3%
TB AFB sputum result turn-around time under 48 hours rate	80.0%	80.0%	80.4%	80.0%	81.1%	80.0%	83.1%	80.0%	86.1%
TB new client treatment success rate	82.0%	82.0%	32.8%	82.0%	27.7%	82.0%	77.1%	82.0%	70.9%
HIV testing coverage (15-49 Years - Annualised)	40.0%	34.0%	29.4%	36.0%	33.1%	38.0%	30.2%	40.0%	34.9%
TB (new pulmonary) cure rate	80.0%	80.0%	30.3%	80.0%	25.9%	80.0%	69.3%	80.0%	65.2%
TB MDR confirmed treatment initiation rate	93.0%	93.0%	179.7%	93.0%	115.2%	93.0%	100.0%	93.0%	100.0%
Maternal, child and women health									
Immunisation coverage under 1 year	92.0%	92.0%	78.3%	92.0%	75.9%	92.0%	77.8%	92.0%	83.1%
Vitamin A coverage 12-59 months	55.0%	47.0%	40.4%	50.0%	43.5%	53.0%	36.1%	55.0%	47.2%
Deworming 12-59 months coverage	50.0%	47.0%	35.5%	50.0%	39.8%	50.0%	32.8%	50.0%	41.5%
Child under 2 years underweight for age incidence	<25%	<25%	24.35	<27%	21.96	<26%	27.87	<25%	18.88
Measles 1st dose under 1 year coverage	95.0%	95.0%	83.7%	95.0%	79.8%	95.0%	81.6%	95.0%	87.0%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	95.0%	95.0%	82.0%	95.0%	77.9%	95.0%	79.7%	95.0%	85.7%
Rotavirus (RV) 2nd Dose Coverage	100.0%	100.0%	84.2%	100.0%	89.9%	100.0%	84.8%	100.0%	81.2%
Cervical cancer screening coverage	70.0%	65.0%	53.5%	66.0%	81.0%	68.0%	58.8%	70.0%	76.8%
HPV Vaccine Coverage amongst Grade 4 girls	90.0%	90.0%	0%	0%	0%	90.0%	0%	0%	0%
Antenatal 1st visits before 20 weeks rate	60.0%	53.0%	34.6%	56.0%	53.8%	58.0%	45.7%	60.0%	45.3%
Infant given NVP within 72 hours after birth uptake rate	99.0%	99.0%	97.8%	99.0%	98.2%	99.0%	99.8%	99.0%	97.9%
Infant 1st PCR Test positive around 6 weeks rate	<2%	<2%	1.5%	<2%	1.6%	<2%	2.4%	<2%	1.5%
Couple year protection rate	37.0%	33.0%	72.6%	34.0%	92.0%	35.0%	95.9%	37.0%	83.7%
Disease Prevention and Control									
Hypertension incidence	0.20	0.05	14.41	0.05	16.18	0.05	20.22	0.05	13.72
Diabetes incidence	0.01	0.00	3.85	0.00	3.61	0.00	6.34	0.00	4.30
Cataract surgery rate (Uninsured Population)	800/1m	200/1m	775.8	200/1m	780.8	200/1m	608.6	200/1m	614.6
Programme 3: Emergency Medical Services									
EMS operational ambulance coverage	0.25%	0.16	0.25%	0.25%	0.20	0.25	0.19	0.25%	0.14
EMS P1 urban response under 15 minutes rate	69.0%	69.0%	64.0%	69.0%	53.8%	69.0%	54.5%	69.0%	40.5%
EMS P1 rural response under 40 minutes rate	71.0%	71.0%	65.3%	71.0%	57.2%	71.0%	85.7%	71.0%	69.4%
EMS P1 call response under 60 minutes rate	83.0%	83.0%	73.9%	83.0%	56.8%	83.0%	75.2%	83.0%	72.7%
Programme 4: Provincial Hospital Services									
General (regional) hospitals									
Average Length of Stay	5.0 days	5.0 days	6.7 days	5.0 days	6.3 days	5.0 days	6.2 days	5.0 days	5.8 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	75.0%	75.0%	83.7%	75.0%	62.2%	75.0%	60.6%
Expenditure per patient day equivalent (PDE)	R 2 300	R 2 300	R 1 996	R 2 300	R 2 218	R 2 300	R 2 400	R 2 300	R 3 736
Complaint Resolution within 25 working days rate	90.0%	90.0%	100.0%	90.0%	100.0%	90.0%	111.6%	90.0%	100.0%
Mental health admission rate	1.2%	1.2%	2.9%	1.2%	0.9%	1.2%	1.2%	1.2%	1.4%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	100.0%	50.0%	100.0%	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%	100.0%	0%	100.0%	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th 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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 5: Central Hospital Services									
Tertiary Hospitals									
Average Length of Stay	5.0 days	5.0 days	6.6 days	5.0 days	5.0 days	5.0 days	7.3 days	5.0 days	7.3 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	38.6%	75.0%	37.8%	75.0%	29.2%	75.0%	43.8%
Expenditure per patient day equivalent (PDE)	R 2 400	R 2 400	R 476	R 2 400	R 642	R 2 400	R 0	R 2 400	R 1 018
Complaint Resolution within 25 working days rate	90.0%	90.0%	90.5%	90.0%	94.2%	90.0%	100.0%	90.0%	100.0%
Mental health admission rate	0%	0%	2.2%	0%	1.2%	0%	2.0%	0%	1.8%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	0%	0%	0%	0%	0%	0%	0%	0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%	0%	0%	0%	0%
Central Hospitals									
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 Core									
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards									
Programme 8: Health Facilities Management									
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	13.0%	0%	7.9%	0%	11.9%	0%	31.6%	13.0%	16.6%
Number of districts spending more than 90% of maintenance budget	4	-	5	-	5	-	5	4	4

1. Information submitted by: A.J. Lekakala Head Official: Health North West Tel No (018) 388 3843

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

* This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th Quarter
WESTERN CAPE

Sector: Health

Programme / Subprogramme / Performance Measures

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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 1: Administration									
Proportion of health facilities connected to the internet	No target set	No target set	90.1%	No target set	90.1%	No target set	90.1%	No target set	90.1%
Programme 2: District Health Services									
PHC Utilisation rate	2.4	2.4	2.3	2.4	2.4	2.4	2.2	2.4	2.2
OHV registration visit coverage	Not applicable in W Cape	Not applicable in W Cape	0%	Not applicable in W Cape	0%	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%	81.7%	94.2%	81.5%	94.2%	80.1%
Complaint resolution within 25 working days rate	88.6%	88.7%	96.3%	88.7%	94.1%	88.7%	98.3%	88.3%	97.3%
Number of fully fledged District Clinical specialist Teams appointed	Not applicable in W Cape	Not applicable in W Cape	-	Not applicable in W Cape	-	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	-	Not applicable in W Cape	-	Not applicable in W Cape	-
School ISHP coverage	61.6%	61.6%	33.8%	61.6%	44.2%	61.6%	48.9%	61.4%	33.4%
School Grade 1 screening coverage	29.1%	29.1%	22.6%	29.1%	37.4%	29.1%	35.9%	29.1%	27.2%
School Grade 4 screening coverage	No target set	No target set	0.2%	No target set	0.1%	No target set	0.1%	No target set	0.8%
School Grade 6 screening coverage	No target set	No target set	0.1%	No target set	0%	No target set	0%	No target set	0.1%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Core	29.0%	7.2%	0%	7.2%	0.7%	7.2%	27.8%	7.2%	1.4%
Compliance Rate of PHC Facilities (of National Core Standards)	No target set	No target set	0%	No target set	0%	No target set	0%	No target set	0%
District Hospitals									
Average Length of Stay	3.2 days	3.2 days	3.2 days	3.2 days	3.0 days	3.2 days	3.2 days	3.2 days	3.2 days
Inpatient Bed Utilisation Rate	83.4%	83.4%	89.8%	83.4%	89.8%	83.4%	91.1%	83.4%	84.6%
Expenditure per patient day equivalent (PDE)	R 1 865	R 1 865	R 1 710	R 1 865	R 1 844	R 1 865	R 1 805	R 1 865	R 1 880
Complaint Resolution within 25 working days rate	78.4%	78.4%	88.6%	78.4%	90.0%	78.4%	89.8%	78.5%	88.5%
Mental health admission rate	Not applicable	Not applicable	0.8%	Not applicable	1.4%	Not applicable	1.3%	Not applicable	2.4%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	76.5%	20.6%	0%	20.6%	5.9%	20.6%	35.3%	14.7%	8.8%
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%	No target set	0%	No target set	0%
HIV and AIDS, TB and STI control									
Total clients remaining on ART (TROA) at end of the month	174 868	149 265	161 283	157 205	166 429	165 145	169 752	173 085	175 159
Number of Medical Male Circumcisions conducted	21 502	5 376	4 264	5 376	4 354	5 376	3 293	5 374	3 570
TB (new pulmonary) defaulter rate	7.1%	7.1%	13.9%	7.1%	7.6%	7.1%	9.2%	7.0%	8.8%
TB AFB sputum result turn-around time under 48 hours rate	69.9%	69.9%	71.4%	69.9%	71.2%	69.9%	71.3%	69.9%	72.1%
TB new client treatment success rate	85.5%	85.5%	79.6%	85.5%	70.6%	85.5%	81.3%	85.5%	83.0%
HIV testing coverage (15-49 Years - Annualised)	30.7%	30.7%	29.2%	30.7%	35.5%	30.7%	37.5%	30.7%	30.4%
TB (new pulmonary) cure rate	82.5%	82.5%	82.0%	82.5%	81.8%	82.5%	77.3%	82.6%	79.3%
TB MDR confirmed treatment initiation rate	No target set	No target set	0%	No target set	187.0%	No target set	0%	No target set	0%
Maternal, child and women health									
Immunisation coverage under 1 year	91.9%	91.9%	87.5%	91.9%	87.6%	91.9%	88.7%	91.9%	93.8%
Vitamin A coverage 12-59 months	44.8%	44.8%	44.8%	44.8%	47.1%	44.8%	44.4%	44.8%	48.5%
Deworming 12-59 months coverage	30.2%	30.2%	41.8%	30.2%	40.8%	30.2%	41.9%	30.2%	41.5%
Child under 2 years underweight for age incidence	18.00	18.00	17.01	18.00	14.44	18.00	12.97	18.00	17.41
Measles 1st dose under 1 year coverage	92.0%	92.0%	91.1%	92.0%	90.2%	92.0%	92.4%	92.0%	96.6%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	92.1%	92.1%	88.7%	92.1%	90.7%	92.1%	92.6%	92.1%	96.2%
Rote Virus (RV) 2nd Dose Coverage	91.5%	91.5%	92.1%	91.5%	92.2%	91.5%	92.9%	91.5%	87.9%
Cervical cancer screening coverage	57.0%	57.0%	55.1%	57.0%	66.1%	57.0%	54.1%	57.0%	57.3%
HPV Vaccine Coverage amongst Grade 4 girls	No target set	No target set	83.5%	No target set	0%	No target set	0%	No target set	0%
Antenatal 1st visits before 20 weeks rate	64.0%	64.0%	62.0%	64.0%	66.1%	64.0%	67.1%	64.0%	64.1%
Infant given NVP within 72 hours after birth uptake rate	98.6%	98.6%	99.3%	98.6%	99.2%	98.6%	99.1%	98.5%	97.5%
Infant 1st PCR Test positive around 6 weeks rate	1.7%	1.7%	1.4%	1.7%	1.4%	1.7%	1.3%	1.7%	1.6%
Couple year protection rate	61.3%	61.3%	58.6%	61.3%	63.2%	61.3%	57.3%	61.3%	58.2%
Disease Prevention and Control									
Hypertension incidence	10.92	4.00	7.66	2.00	9.26	3.00	6.71	7.00	6.03
Diabetes incidence	1.51	1.00	3.42	1.00	3.68	1.00	2.94	2.00	2.71
Cataract surgery rate (Uninsured Population)	1 724.0	1 909.0	1 755.9	838.0	1 861.4	1 459.0	1 673.9	2 817.0	1 475.9
Programme 3: Emergency Medical Services									
EMS operational ambulance coverage	0.00	0.00	0.40	0.00	0.39	0.41	0.40	0.00	0.40
EMS P1 urban response under 15 minutes rate	75.0%	75.0%	56.2%	75.0%	60.0%	75.0%	62.4%	75.0%	68.4%
EMS P1 rural response under 40 minutes rate	90.0%	90.0%	81.0%	90.0%	84.0%	90.0%	83.0%	90.0%	84.6%
EMS P1 call response under 60 minutes rate	80.0%	80.0%	94.6%	80.0%	94.9%	80.0%	94.9%	80.0%	95.9%
Programme 4: Provincial Hospital Services									
General (regional) hospitals									
Average Length of Stay	3.8 days	3.8 days	3.8 days	3.8 days	3.7 days	3.8 days	3.8 days	3.8 days	3.6 days
Inpatient Bed Utilisation Rate	85.6%	85.8%	85.2%	85.2%	83.7%	84.5%	84.2%	86.6%	79.1%
Expenditure per patient day equivalent (PDE)	R 2 618	R 2 646	R 2 421	R 2 561	R 2 625	R 2 616	R 2 606	R 2 652	R 2 866
Complaint Resolution within 25 working days rate	92.7%	92.2%	94.8%	92.2%	98.9%	92.2%	85.7%	94.1%	84.2%
Mental health admission rate	1.7%	1.6%	1.5%	1.6%	1.6%	1.8%	1.7%	1.7%	1.7%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	0%	0%	0%	0%	0%	0%	100.0%	20.0%
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%	No target set	0%	No target set	0%

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 4th Quarter
WESTERN CAPE

Sector: Health

Programme / Subprogramme / Performance Measures

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 Actual output - validated	3rd Quarter Planned output as per APP	3rd Quarter Actual output - validated	4th Quarter Planned output as per APP	4th Quarter Preliminary output
QUARTERLY OUTPUTS									
Programme 5: Central Hospital Services									
Tertiary Hospitals									
Average Length of Stay	3.7 days	3.7 days	3.9 days	3.7 days	3.9 days	3.7 days	3.9 days	3.7 days	4.0 days
Inpatient Bed Utilisation Rate	85.0%	85.0%	86.4%	85.0%	84.2%	85.0%	78.6%	85.0%	73.2%
Expenditure per patient day equivalent (PDE)	R 4 534	R 4 534	R 4 208	R 4 534	R 4 820	R 4 534	R 5 348	R 4 534	R 5 142
Complaint Resolution within 25 working days rate	90.0%	90.6%	67.6%	90.6%	63.6%	90.6%	79.3%	88.1%	80.0%
Mental health admission rate	N/A	N/A	0%	N/A	0%	N/A	0%	N/A	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	0%	0%	0%	0%	0%	0%	100.0%	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%	No target set	0%	No target set	0%
Central Hospitals									
Average Length of Stay	6.1 days	6.1 days	6.3 days	6.1 days	6.2 days	6.1 days	6.1 days	6.1 days	6.2 days
Inpatient Bed Utilisation Rate	85.6%	85.6%	85.6%	85.6%	85.6%	85.6%	85.1%	85.6%	81.9%
Expenditure per patient day equivalent (PDE)	R 4 236	R 4 236	R 4 274	R 4 236	R 4 212	R 4 236	R 4 221	R 4 236	R 4 221
Complaint Resolution within 25 working days rate	82.5%	82.2%	86.4%	82.2%	88.0%	82.2%	85.8%	83.2%	79.5%
Mental health admission rate	1.4%	1.4%	1.3%	1.4%	1.3%	1.4%	1.3%	1.4%	1.2%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core	100.0%	0%	0%	0%	0%	0%	0%	100.0%	50.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	No target set	No target set	0%	0%	0%	0%	0%	0%	0%
Programme 8: Health Facilities Management									
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	100.0%	100.0%	107.8%	100.0%	71.4%	100.0%	63.5%	100.0%	55.3%
Number of districts spending more than 90% of maintenance budget	No target set	No target set	-	No target set	-	No target set	-	No target set	-

1. Information submitted by: Dr B Engelsbrecht Head Official: Health Western Cape Tel No (021) 483 3647

Z Hoosan Head Official: Provincial Treasury Western Cape