

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

FREE STATE

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 1: Administration			
Percentage of Hospitals with broadband access	25.0%	-	0%
Percentage of fixed PHC facilities with broadband access	14.0%	-	0%
Programme 2: District Health Services			
District Management			
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	65.0%	17.0%	27.0%
Client Satisfaction Survey Rate (PHC)	85.0%	16.0%	17.7%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	5	5	5
PHC utilisation rate	3.2	3.2	2.8
Complaints resolution rate (PHC)	85.0%	85.0%	76.2%
Complaint resolution within 25 working days rate (PHC)	85.0%	85.0%	96.8%
District Hospitals			
National Core Standards self assessment rate (District Hospitals)	100.0%	25.0%	16.7%
Quality improvement plan after self assessment rate (District Hospitals)	100.0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (District Hospitals)	-	-	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	25.0%	79.2%
Average Length of Stay (District Hospitals)	3.0 days	3.0 days	3.4 days
Inpatient Bed Utilisation Rate (District Hospitals)	75.0%	75.0%	70.0%
Expenditure per PDE (District Hospitals)	R 2 300	R 2 300	R 2 858
Complaints resolution rate (District Hospitals)	85.0%	85.0%	80.0%
Complaint Resolution within 25 working days rate (District Hospitals)	85.0%	85.0%	97.7%
HIV and AIDS, STI and TB (HAST)			
Adults remaining on ART – Total	237 953	193 876	188 970
Total Children (under 15 years) remaining on ART – Total	12 878	12 216	9 910
TB/HIV co-infected client on ART rate	85.0%	85.0%	86.7%
Client tested for HIV (incl ANC)	652 059	163 015	174 546
TB symptom 5yrs and older screened rate	70.0%	70.0%	65.0%
Male condom distribution Coverage	50	50	40
Medical male circumcision performed - Total	40 997	8 199	8 939
TB client treatment success rate	85.0%	85.0%	84.3%
TB client lost to follow up rate	5.0%	5.0%	4.9%
Maternal, Child and Women's Health and Nutrition (MCWH&N)			
Antenatal 1st visit before 20 weeks rate	65.0%	65.0%	65.3%
Mother postnatal visit within 6 days rate	85.0%	85.0%	74.2%
Infant 1st PCR test positive around 10 weeks rate	<2%	<2%	1.2%
Immunisation under 1 year coverage (annualised)	95.0%	95.0%	87.3%
Measles 2nd dose coverage (annualised)	87.0%	87.0%	118.1%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	5.5%	5.5%	-9.6%
Child under 5 years diarrhoea case fatality rate	<3%	<3%	5.8%
Child under 5 years pneumonia case fatality rate	<3%	<3%	2.8%
Child under 5 years severe acute malnutrition case fatality rate	11.0%	11.0%	16.7%
School Grade 1 screening coverage (annualised)	50.0%	50.0%	66.9%
School Grade 8 screening coverage (annualised)	45.0%	45.0%	43.1%
Couple year protection rate (annualised)	60.0%	60.0%	50.4%
Cervical cancer screening coverage (annualised)	60.0%	60.0%	68.1%
Vitamin A 12-59 months coverage (annualised)	65.0%	65.0%	53.3%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	87.0%	87.0%	34.1%
Disease Prevention and Control			
Clients screened for hypertension	700 000	175 000	371 780
Clients screened for diabetes	700 000	175 000	262 430
Client screened for Mental Health	632 558	158 139	416 954
Cataract Surgery Rate annualised	1 500.0	1 500.0	1 013.0
Malaria case fatality rate	-	-	0%
Programme 3: Emergency Medical Services (EMS)			
EMS P1 urban response under 15 minutes rate	55.0%	55.0%	47.2%
EMS P1 rural response under 40 minutes rate	71.0%	71.0%	71.0%
EMS inter-facility transfer rate	10.0%	10.0%	24.5%

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FREE STATE

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 4: Provincial Hospital Services			
Regional Hospitals			
National Core Standards self assessment rate (Regional Hospitals)	100.0%	25.0%	0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Regional Hospitals)	-	-	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	100.0%	100.0%
Average Length of Stay (Regional Hospitals)	5.0 days	5.0 days	5.5 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	75.0%	75.0%	73.6%
Expenditure per PDE (Regional Hospitals)	R 2 600	R 2 600	R 2 959
Complaints resolution rate (Regional Hospitals)	85.0%	85.0%	84.1%
Complaint Resolution within 25 working days rate (Regional Hospitals)	85.0%	85.0%	100.0%
Specialised Hospitals			
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	-	100.0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	-	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	-	-	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	100.0%	100.0%
Complaints resolution rate (Specialised Hospitals)	85.0%	85.0%	100.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	85.0%	85.0%	100.0%
Programme 5: Central Hospital Services (C&THS)			
Provincial Tertiary Hospitals Services			
National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Tertiary Hospitals)	-	-	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100.0%	100.0%	100.0%
Average Length of Stay (Tertiary Hospitals)	7.5 days	7.5 days	5.7 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	80.0%	80.0%	98.4%
Expenditure per PDE (Tertiary Hospitals)	R 3 000	R 3 000	R 3 379
Complaints resolution rate (Tertiary Hospitals)	85.0%	85.0%	33.3%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	85.0%	85.0%	100.0%
Provincial Central Hospitals Services			
National Core Standards self assessment rate (Central Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Central Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Central Hospitals)	-	-	0%
Patient Satisfaction Survey Rate (Central Hospitals)	100.0%	100.0%	100.0%
Average Length of Stay (Central Hospitals)	7.5 days	7.5 days	8.1 days
Inpatient Bed Utilisation Rate (Central Hospitals)	78.0%	78.0%	93.3%
Expenditure per PDE (Central Hospitals)	R 5 500	R 5 500	R 5 776
Complaints resolution rate (Central Hospitals)	85.0%	85.0%	100.0%
Complaint Resolution within 25 working days rate (Central Hospitals)	85.0%	85.0%	100.0%

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

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

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

GAUTENG

Sector: Health

Programme / Subprogramme / Performance Measures

**Target for 2016/17
as per
Annual
Performance
Plan (APP)**

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

**1st Quarter
Preliminary
output**

QUARTERLY OUTPUTS

Programme 1: Administration

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

100%(36/36)
27%(100/372) 100.0%
27%(100)

Programme 2: District Health Services

District Management

Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard
Client Satisfaction Survey Rate (PHC)
OHH registration visit coverage (annualised)
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)
PHC utilisation rate
Complaints resolution rate (PHC)
Complaint resolution within 25 working days rate (PHC)

100%372/272
100%372/372 100.0%
100.0% 64.2%
80.0% 0%
80.0% 20.2%
5 of 5 5
2.8 1.6
95.0% 88.1%
82.0% 96.7%

District Hospitals

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

100%(11 of 11)
85%(9 of 11) 100%(11 of 11)
20%(2 of 11) 85%(9 of 11)
20%(2 of 11) 0%
100.0% 100%(11 of 11)
4.5 days - 4.5 days
80.0% - 65.5%
R 2650 R 2650 R 2 992
85.0% 85.0% 85.7%
85.0% 85.0% 102.6%

HIV and AIDS, STI and TB (HAST)

Adults remaining on ART – Total
Total Children (under 15 years) remaining on ART – Total
TB/HIV co-infected client on ART rate
Client tested for HIV (incl ANC)
TB symptom 5yrs and older screened rate
Male condom distribution Coverage
Medical male circumcision performed - Total
TB client treatment success rate
TB client lost to follow up rate

829 643 767 419 724 124
38 521 32 150 30 723
85.0% 21.0% 48.0%
3 592 943 2 488 165 575 837
5M 1.5 M 58.9%
210 960 993 52 740 248 22
209 190 72 297 14 879
90.0% 90.0% 87.9%
5.1% 5.1% 5.0%

Maternal, Child and Women's Health and Nutrition (MCWH&N)

Antenatal 1st visit before 20 weeks rate
Mother postnatal visit within 6 days rate
Infant 1st PCR test positive around 10 weeks rate
Immunisation under 1 year coverage (annualised)
Measles 2nd dose coverage (annualised)
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate
Child under 5 years diarrhoea case fatality rate
Child under 5 years pneumonia case fatality rate
Child under 5 years severe acute malnutrition case fatality rate
School Grade 1 screening coverage (annualised)
School Grade 8 screening coverage (annualised)
Couple year protection rate (annualised)
Cervical cancer screening coverage (annualised)
Vitamin A 12-59 months coverage (annualised)
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate

60.0% 60.0% 42.8%
90.0% 90.0% 83.1%
<1.5% <1.5% 2 946.1%
92.0% 92.0% 90.9%
95.0% 95.0% 88.3%
<10% <10% 101.3%
2.5% 2.5% 2.1%
<2% <2% 0.6%
<10% <10% 8.0%
40.0% 20.0% 52.5%
15.0% 5.0% 61.6%
60.0% 60.0% 30.6%
60.0% 60.0% 44.7%
60.0% 60.0% 63.3%
60.0% 60.0% 365.0%

Disease Prevention and Control

Clients screened for hypertension
Clients screened for diabetes
Client screened for Mental Health
Cataract Surgery Rate annualised
Malaria case fatality rate

474 000 119 500 1712 418
400 000 100 000 1161 807
1 1 718 047
1300/Mil 1500/Mil -
1.7% - 0%

Programme 3: Emergency Medical Services (EMS)

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

99%(19822/19962)
100%(304/304) 99.0%
100.0% 100.0%
13%(110342/799683) 10.5% 53.9%
100.0% 100.0% 31.6%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

GAUTENG

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 4: Provincial Hospital Services			
Regional Hospitals			
National Core Standards self assessment rate (Regional Hospitals)	100%(9/9)	100.0%	22.2%
Quality improvement plan after self assessment rate (Regional Hospitals)	40%(3/9)	40.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Regional Hospitals)	33%(3/9)	33.0%	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100%(9/9)	100.0%	0%
Average Length of Stay (Regional Hospitals)	4.9 days	4.9 days	5.3 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	82%(300/400)	82.0%	80.7%
Expenditure per PDE (Regional Hospitals)	R 3000	R 3000	R 2 468
Complaints resolution rate (Regional Hospitals)	88.0%	88.0%	93.5%
Complaint Resolution within 25 working days rate (Regional Hospitals)	82.0%	82.0%	100.0%
Specialised Hospitals			
National Core Standards self assessment rate (Specialised Hospitals)	100%(9/9)	100%(9/9)	0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	40%(3/9)	40.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	41%(3/9)	41.0%	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	100.0%	0%
Complaints resolution rate (Specialised Hospitals)	88.0%	88.0%	73.3%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	82.0%	82.0%	100.0%
Programme 5: Central Hospital Services (C&THS)			
Provincial Tertiary Hospitals Services			
National Core Standards self assessment rate (Tertiary Hospitals)	100%(3/3)	100.0%	33.3%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100%(3/3)	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Tertiary Hospitals)	100%(3/3)	100.0%	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100%(3/3)	100.0%	0%
Average Length of Stay (Tertiary Hospitals)	5.5 days	5.5 days	6.3 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	82.0%	82.0%	85.8%
Expenditure per PDE (Tertiary Hospitals)	R 2760	R 2760	R 3 211
Complaints resolution rate (Tertiary Hospitals)	95.0%	95.0%	86.3%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	80.0%	80.0%	100.0%
Provincial Central Hospitals Services			
National Core Standards self assessment rate (Central Hospitals)	100%(4/4)	100.0%	50.0%
Quality improvement plan after self assessment rate (Central Hospitals)	100%(4/4)	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Central Hospitals)	100%(4/4)	100.0%	0%
Patient Satisfaction Survey Rate (Central Hospitals)	100%(4/4)	100.0%	0%
Average Length of Stay (Central Hospitals)	5.6 days	5.6 days	7.9 days
Inpatient Bed Utilisation Rate (Central Hospitals)	78.0%	78.0%	77.7%
Expenditure per PDE (Central Hospitals)	R 3 500	R 3 500	R 3 089
Complaints resolution rate (Central Hospitals)	80.0%	80.0%	78.2%
Complaint Resolution within 25 working days rate (Central Hospitals)	90.0%	90.0%	98.9%

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

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

**QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter
KWAZULU-NATAL**

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 1: Administration			
Percentage of Hospitals with broadband access	50.0%	45.0%	47.1%
Percentage of fixed PHC facilities with broadband access	50.0%	45.0%	4.7%
Programme 2: District Health Services			
District Management			
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	40.0%	15.0%	24.6%
Client Satisfaction Survey Rate (PHC)	100.0%	25.0%	38.5%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	2	-	-
PHC utilisation rate	3.0	3.0	2.7
Complaints resolution rate (PHC)	85.0%	80.0%	86.7%
Complaint resolution within 25 working days rate (PHC)	95.0%	94.5%	92.4%
District Hospitals			
National Core Standards self assessment rate (District Hospitals)	100.0%	25.0%	42.1%
Quality improvement plan after self assessment rate (District Hospitals)	100.0%	25.0%	37.5%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (District Hospitals)	21.0%	5.0%	25.0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	25.0%	68.4%
Average Length of Stay (District Hospitals)	6.0 days	6.3 days	5.6 days
Inpatient Bed Utilisation Rate (District Hospitals)	65.8%	63.0%	57.2%
Expenditure per PDE (District Hospitals)	R 1 947	R 2 000	R 2 221
Complaints resolution rate (District Hospitals)	80.0%	75.0%	85.7%
Complaint Resolution within 25 working days rate (District Hospitals)	95.0%	92.0%	87.4%
HIV and AIDS, STI and TB (HAST)			
Adults remaining on ART – Total	1205 438	1027 525	1000 515
Total Children (under 15 years) remaining on ART – Total	68 286	60 153	54 429
TB/HIV co-infected client on ART rate	90.0%	85.0%	86.3%
Client tested for HIV (incl ANC)	2 659 268	664 817	667 608
TB symptom 5yrs and older screened rate	35.0%	9.0%	63.4%
Male condom distribution Coverage	62	50	47
Medical male circumcision performed - Total	793 528	652 814	28 371
TB client treatment success rate	86.0%	86.0%	86.3%
TB client lost to follow up rate	3.4%	3.8%	4.0%
Maternal, Child and Women's Health and Nutrition (MCWH&N)			
Antenatal 1st visit before 20 weeks rate	62.6%	62.0%	66.1%
Mother postnatal visit within 6 days rate	82.0%	73.0%	59.8%
Infant 1st PCR test positive around 10 weeks rate	<1%	<1%	2.3%
Immunisation under 1 year coverage (annualised)	92.0%	90.0%	77.8%
Measles 2nd dose coverage (annualised)	90.0%	88.5%	93.5%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	6.0%	7.1%	-37.7%
Child under 5 years diarrhoea case fatality rate	2.8%	2.9%	2.1%
Child under 5 years pneumonia case fatality rate	3.0%	3.2%	2.2%
Child under 5 years severe acute malnutrition case fatality rate	8.0%	8.7%	5.2%
School Grade 1 screening coverage (annualised)	25.0%	6.5%	51.2%
School Grade 8 screening coverage (annualised)	20.0%	5.0%	49.9%
Couple year protection rate (annualised)	60.0%	50.0%	48.4%
Cervical cancer screening coverage (annualised)	75.0%	73.4%	95.7%
Vitamin A 12-59 months coverage (annualised)	65.0%	65.0%	63.0%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	55.0%	52.0%	55.9%
Disease Prevention and Control			
Clients screened for hypertension	7 980 052	1 995 013	2 239 442
Clients screened for diabetes	5 127 276	1 281 819	2 132 126
Client screened for Mental Health	100 000	25 000	1033 007
Cataract Surgery Rate annualised	1154/1mil	683/1mil	432.1
Malaria case fatality rate	<0.5%	<0.5%	2.1%
Programme 3: Emergency Medical Services (EMS)			
EMS P1 urban response under 15 minutes rate	6.0%	5.0%	4.4%
EMS P1 rural response under 40 minutes rate	34.0%	33.0%	33.9%
EMS inter-facility transfer rate	40.0%	41.0%	30.9%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

KWAZULU-NATAL

Sector: Health

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QUARTERLY OUTPUTS			
Programme 4: Provincial Hospital Services			
Regional Hospitals			
National Core Standards self assessment rate (Regional Hospitals)	100.0%	25.0%	76.9%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	25.0%	50.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	25.0%	-	30.0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	25.0%	53.8%
Average Length of Stay (Regional Hospitals)	6.5 days	6.3 days	6.2 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	70.5%	67.6%	74.0%
Expenditure per PDE (Regional Hospitals)	R 2 822	R 2 822	R 3 046
Complaints resolution rate (Regional Hospitals)	86.0%	83.0%	78.9%
Complaint Resolution within 25 working days rate (Regional Hospitals)	97.5%	97.2%	100.0%
Specialised Hospitals			
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	25.0%	36.8%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	25.0%	14.3%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	22.0%	-	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	25.0%	47.4%
Complaints resolution rate (Specialised Hospitals)	83.2%	82.0%	44.7%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	94.4%	94.4%	97.1%
Programme 5: Central Hospital Services (C&THS)			
Provincial Tertiary Hospitals Services			
National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Tertiary Hospitals)	33.0%	-	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100.0%	-	33.3%
Average Length of Stay (Tertiary Hospitals)	7.7 days	7.7 days	8.0 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	78.9%	77.0%	87.7%
Expenditure per PDE (Tertiary Hospitals)	R 2 894	R 2 894	R 3 127
Complaints resolution rate (Tertiary Hospitals)	85.0%	84.0%	65.6%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	100.0%	100.0%	90.5%
Provincial Central Hospitals Services			
National Core Standards self assessment rate (Central Hospitals)	100.0%	-	100.0%
Quality improvement plan after self assessment rate (Central Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Central Hospitals)	100.0%	-	0%
Patient Satisfaction Survey Rate (Central Hospitals)	100.0%	-	100.0%
Average Length of Stay (Central Hospitals)	8.5 days	8.6 days	8.9 days
Inpatient Bed Utilisation Rate (Central Hospitals)	67.1%	67.1%	66.7%
Expenditure per PDE (Central Hospitals)	R 8 173	R 8 100	R 9 852
Complaints resolution rate (Central Hospitals)	80.0%	75.0%	96.9%
Complaint Resolution within 25 working days rate (Central Hospitals)	96.5%	95.5%	100.0%

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

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

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

LIMPOPO

Sector: Health

Programme / Subprogramme / Performance Measures

**Target for 2016/17
as per
Annual
Performance
Plan (APP)**

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

**1st Quarter
Preliminary
output**

QUARTERLY OUTPUTS

Programme 1: Administration

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

100.0% 100.0% 100.0%
35.0% 30.0% 24.7%

Programme 2: District Health Services

District Management

Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard
Client Satisfaction Survey Rate (PHC)
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)
PHC utilisation rate
Complaints resolution rate (PHC)
Complaint resolution within 25 working days rate (PHC)

15.0% 10.0% 14.5%
30.0% 30.0% 10.7%
1 1 -
2.6 2.6 2.7
95.0% 95.0% 68.9%
95.0% 95.0% 95.7%

District Hospitals

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

100.0% 23.0% 23.3%
100.0% 23.0% 28.6%
70.0% 16.7% 0%
100.0% - 20.0%
4.3 days 4.3 days 4.2 days
70.0% 70.0% 62.6%
R 2 200 R 2 200 R 2 922
100.0% 100.0% 91.4%
100.0% 100.0% 100.0%

HIV and AIDS, STI and TB (HAST)

Adults remaining on ART – Total
Total Children (under 15 years) remaining on ART – Total
TB/HIV co-infected client on ART rate
Client tested for HIV (incl ANC)
TB symptom 5yrs and older screened rate
Male condom distribution Coverage
Medical male circumcision performed - Total
TB client treatment success rate
TB client lost to follow up rate

311 206 269 168 248 891
19 434 16 406 13 711
85.0% 85.0% 90.0%
1 406 507 351 626 424 202
75.0% 75.0% 82.3%
43 43 56
69 231 14 000 5 655
80.0% 80.0% 78.2%
4.5% 4.5% 5.2%

Maternal, Child and Women's Health and Nutrition (MCWH&N)

Antenatal 1st visit before 20 weeks rate
Mother postnatal visit within 6 days rate
Infant 1st PCR test positive around 10 weeks rate
Immunisation under 1 year coverage (annualised)
Measles 2nd dose coverage (annualised)
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate
Child under 5 years diarrhoea case fatality rate
Child under 5 years pneumonia case fatality rate
Child under 5 years severe acute malnutrition case fatality rate
School Grade 1 screening coverage (annualised)
School Grade 8 screening coverage (annualised)
Couple year protection rate (annualised)
Cervical cancer screening coverage (annualised)
Vitamin A 12-59 months coverage (annualised)
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate

50.0% 50.0% 64.0%
80.0% 80.0% 69.6%
1.4% 1.4% 1.7%
90.0% 90.0% 62.9%
85.0% 85.0% 91.4%
6.0% 6.0% - 58.1%
4.5% 4.5% 2.1%
4.3% 4.3% 2.9%
14.0% 14.0% 11.9%
20.0% 20.0% 80.3%
10.0% 10.0% 38.2%
48.0% 48.0% 52.9%
50.0% 50.0% 46.0%
45.0% 45.0% 55.6%
55.0% 55.0% 18.1%

Disease Prevention and Control

Clients screened for hypertension
Clients screened for diabetes
Client screened for Mental Health
Cataract Surgery Rate annualised
Malaria case fatality rate

500 000 125 000 882 387
230 000 57 500 532 394
30 30 342 440
1 500.0 375.0 -
1.2% 1.2% 0.7%

Programme 3: Emergency Medical Services (EMS)

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

68.0% 68.0% 45.6%
70.0% 70.0% 59.8%
22.0% 22.0% 14.3%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

LIMPOPO

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 4: Provincial Hospital Services			
Regional Hospitals			
National Core Standards self assessment rate (Regional Hospitals)	100.0%	40.0%	40.0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	40.0%	50.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	60.0%	60.0%	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	-	20.0%
Average Length of Stay (Regional Hospitals)	5.0 days	5.0 days	5.0 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	70.0%	70.0%	36.6%
Expenditure per PDE (Regional Hospitals)	R 2 700	R 2 700	R 3 197
Complaints resolution rate (Regional Hospitals)	100.0%	100.0%	75.6%
Complaint Resolution within 25 working days rate (Regional Hospitals)	95.0%	95.0%	102.0%
Specialised Hospitals			
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	60.0%	60.0%	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	-	0%
Complaints resolution rate (Specialised Hospitals)	100.0%	100.0%	100.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	100.0%	100.0%	100.0%
Programme 5: Central Hospital Services (C&THS)			
Provincial Tertiary Hospitals Services			
National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	100.0%	100.0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	100.0%	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100.0%	-	50.0%
Average Length of Stay (Tertiary Hospitals)	7.0 days	7.0 days	7.4 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	78.0%	78.0%	76.6%
Expenditure per PDE (Tertiary Hospitals)	R 3 800	R 3 800	R 4 721
Complaints resolution rate (Tertiary Hospitals)	100.0%	100.0%	83.0%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	100.0%	100.0%	100.0%
Provincial Central Hospitals Services			
National Core Standards self assessment rate (Central Hospitals)	-	-	-
Quality improvement plan after self assessment rate (Central Hospitals)	-	-	-
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	-	-	-
Patient Satisfaction Survey Rate (Central Hospitals)	-	-	-
Average Length of Stay (Central Hospitals)	-	-	-
Inpatient Bed Utilisation Rate (Central Hospitals)	-	-	-
Expenditure per PDE (Central Hospitals)	-	-	-
Complaints resolution rate (Central Hospitals)	-	-	-
Complaint Resolution within 25 working days rate (Central Hospitals)	-	-	-

1. Information submitted by: Dr. SF Ndhambi Acting Head of Department: Health Limpopo: Tel: (015) 2936294 MR N. Nchabeleng Director General Office of the Premier Limpopo

* This province does not have Central Hospitals

**QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter
MPUMALANGA**

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 1: Administration			
Percentage of Hospitals with broadband access	100.0%	100.0%	100.0%
Percentage of fixed PHC facilities with broadband access	80.0%	35.0%	35.8%
Programme 2: District Health Services			
District Management			
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	80.0%	35.0%	0%
Client Satisfaction Survey Rate (PHC)	100.0%	-	0%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	1	-	-
PHC utilisation rate	2.5	2.5	3.2
Complaints resolution rate (PHC)	86.0%	86.0%	57.1%
Complaint resolution within 25 working days rate (PHC)	90.0%	90.0%	96.7%
District Hospitals			
National Core Standards self assessment rate (District Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (District Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (District Hospitals)	30.0%	-	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	-	0%
Average Length of Stay (District Hospitals)	3.7 days	3.7 days	4.7 days
Inpatient Bed Utilisation Rate (District Hospitals)	75.0%	74.0%	35.5%
Expenditure per PDE (District Hospitals)	R 2 114	R 2 114	R 2 175
Complaints resolution rate (District Hospitals)	90.0%	90.0%	67.4%
Complaint Resolution within 25 working days rate (District Hospitals)	96.0%	96.0%	97.7%
HIV and AIDS, STI and TB (HAST)			
Adults remaining on ART – Total	372 014	339 747	784 694
Total Children (under 15 years) remaining on ART – Total	28 001	25 572	41 672
TB/HIV co-infected client on ART rate	100.0%	100.0%	27.7%
Client tested for HIV (incl ANC)	1 074 568	288 642	319 134
TB symptom 5yrs and older screened rate	90.0%	90.0%	0.0%
Male condom distribution Coverage	50	50	419
Medical male circumcision performed - Total	85 084	26 000	14 969
TB client treatment success rate	>85%	>85%	86.4%
TB client lost to follow up rate	<5%	<5%	3.9%
Maternal, Child and Women's Health and Nutrition (MCWH&N)			
Antenatal 1st visit before 20 weeks rate	70.0%	70.0%	70.0%
Mother postnatal visit within 6 days rate	70.0%	70.0%	64.2%
Infant 1st PCR test positive around 10 weeks rate	<1.6%	<1.6%	1.5%
Immunisation under 1 year coverage (annualised)	90.0%	90.0%	101.7%
Measles 2nd dose coverage (annualised)	90.0%	90.0%	111.4%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	<10%	<10%	69.5%
Child under 5 years diarrhoea case fatality rate	4.0%	4.0%	3.7%
Child under 5 years pneumonia case fatality rate	3.6%	360.0%	3.4%
Child under 5 years severe acute malnutrition case fatality rate	15.0%	15.0%	7.9%
School Grade 1 screening coverage (annualised)	28.0%	28.0%	600.0%
School Grade 8 screening coverage (annualised)	15.0%	15.0%	600.0%
Couple year protection rate (annualised)	45.0%	45.0%	84.0%
Cervical cancer screening coverage (annualised)	70.0%	70.0%	84.1%
Vitamin A 12-59 months coverage (annualised)	55.0%	55.0%	62.6%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	55.0%	55.0%	41.5%
Disease Prevention and Control			
Clients screened for hypertension	100 000	15 000	593 655
Clients screened for diabetes	80 000	20 000	258 515
Client screened for Mental Health	1	1	91 175
Cataract Surgery Rate annualised	3 600.0	600.0	2 248.9
Malaria case fatality rate	0.5%	0.5%	0%
Programme 3: Emergency Medical Services (EMS)			
EMS P1 urban response under 15 minutes rate	85.0%	85.0%	75.5%
EMS P1 rural response under 40 minutes rate	75.0%	75.0%	74.7%
EMS inter-facility transfer rate	30.0%	30.0%	3.7%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

MPUMALANGA

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 4: Provincial Hospital Services			
Regional Hospitals			
National Core Standards self assessment rate (Regional Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	-	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	-	0%
Average Length of Stay (Regional Hospitals)	4.7 days	4.7 days	4.5 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	75.0%	75.0%	38.1%
Expenditure per PDE (Regional Hospitals)	R 2 722	R 2 722	R 3 053
Complaints resolution rate (Regional Hospitals)	90.0%	90.0%	69.0%
Complaint Resolution within 25 working days rate (Regional Hospitals)	90.0%	90.0%	92.5%
Specialised Hospitals			
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	100.0%	0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	90.0%	90.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	90.0%	90.0%	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	100.0%	0%
Complaints resolution rate (Specialised Hospitals)	90.0%	90.0%	0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	90.0%	90.0%	0%
Programme 5: Central Hospital Services (C&THS)			
Provincial Tertiary Hospitals Services			
National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	100.0%	0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Tertiary Hospitals)	100.0%	100.0%	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100.0%	-	0%
Average Length of Stay (Tertiary Hospitals)	5.6 days	5.6 days	7.6 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	75.0%	75.0%	39.9%
Expenditure per PDE (Tertiary Hospitals)	R 3 414	R 3 414	R 2 530
Complaints resolution rate (Tertiary Hospitals)	90.0%	90.0%	64.0%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	90.0%	90.0%	100.0%
Provincial Central Hospitals Services			
National Core Standards self assessment rate (Central Hospitals)	-	-	-
Quality improvement plan after self assessment rate (Central Hospitals)	-	-	-
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Central Hospitals)	-	-	-
Patient Satisfaction Survey Rate (Central Hospitals)	-	-	-
Average Length of Stay (Central Hospitals)	-	-	-
Inpatient Bed Utilisation Rate (Central Hospitals)	-	-	-
Expenditure per PDE (Central Hospitals)	-	-	-
Complaints resolution rate (Central Hospitals)	-	-	-
Complaint Resolution within 25 working days rate (Central Hospitals)	-	-	-

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

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

*This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

NORTHERN CAPE

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 1: Administration			
Percentage of Hospitals with broadband access	21.0%	-	7.1%
Percentage of fixed PHC facilities with broadband access	6.0%	-	0%
Programme 2: District Health Services			
District Management			
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	100.0%	19.0%	0%
Client Satisfaction Survey Rate (PHC)	100.0%	100.0%	38.4%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	5	5	5
PHC utilisation rate	2.5	2.5	2.4
Complaints resolution rate (PHC)	100.0%	100.0%	55.2%
Complaint resolution within 25 working days rate (PHC)	80.0%	80.0%	100.0%
District Hospitals			
National Core Standards self assessment rate (District Hospitals)	100.0%	100.0%	0%
Quality improvement plan after self assessment rate (District Hospitals)	100.0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (District Hospitals)	100.0%	100.0%	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	100.0%	9.1%
Average Length of Stay (District Hospitals)	3.5 days	3.5 days	3.6 days
Inpatient Bed Utilisation Rate (District Hospitals)	60.0%	60.0%	59.0%
Expenditure per PDE (District Hospitals)	R 1 815	R 1 815	R 2 955
Complaints resolution rate (District Hospitals)	100.0%	100.0%	22.0%
Complaint Resolution within 25 working days rate (District Hospitals)	80.0%	80.0%	100.0%
HIV and AIDS, STI and TB (HAST)			
Adults remaining on ART – Total	55 575	46 127	42 307
Total Children (under 15 years) remaining on ART – Total	3 570	2 963	3 370
TB/HIV co-infected client on ART rate	100.0%	100.0%	77.7%
Client tested for HIV (incl ANC)	215 259	60 273	62 652
TB symptom 5yrs and older screened rate	60.0%	60.0%	42.5%
Male condom distribution Coverage	37	15	20
Medical male circumcision performed - Total	14 000	3 080	119
TB client treatment success rate	95.0%	95.0%	74.8%
TB client lost to follow up rate	5.5%	5.5%	5.9%
Maternal, Child and Women's Health and Nutrition (MCWH&N)			
Antenatal 1st visit before 20 weeks rate	64.0%	64.0%	65.0%
Mother postnatal visit within 6 days rate	60.0%	60.0%	54.9%
Infant 1st PCR test positive around 10 weeks rate	1.7%	1.7%	2.4%
Immunisation under 1 year coverage (annualised)	85.0%	85.0%	72.3%
Measles 2nd dose coverage (annualised)	85.0%	85.0%	77.1%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	<13%	<13%	42.5%
Child under 5 years diarrhoea case fatality rate	2.5%	2.5%	7.4%
Child under 5 years pneumonia case fatality rate	2.5%	2.5%	1.9%
Child under 5 years severe acute malnutrition case fatality rate	8.5%	8.5%	9.2%
School Grade 1 screening coverage (annualised)	10.0%	10.0%	33.3%
School Grade 8 screening coverage (annualised)	10.0%	10.0%	16.5%
Couple year protection rate (annualised)	45.0%	45.0%	37.6%
Cervical cancer screening coverage (annualised)	40.0%	40.0%	22.3%
Vitamin A 12-59 months coverage (annualised)	45.0%	45.0%	36.7%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	65.0%	65.0%	56.5%
Disease Prevention and Control			
Clients screened for hypertension	111 162	27 791	74 028
Clients screened for diabetes	98 071	20 595	37 679
Client screened for Mental Health	27 568	4 675	9 290
Cataract Surgery Rate annualised	1395/1000000	349/1000000	644.3
Malaria case fatality rate	-	-	0%
Programme 3: Emergency Medical Services (EMS)			
EMS P1 urban response under 15 minutes rate	60.0%	60.0%	35.9%
EMS P1 rural response under 40 minutes rate	50.0%	50.0%	56.1%
EMS inter-facility transfer rate	10.0%	10.0%	12.4%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

NORTHERN CAPE

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 4: Provincial Hospital Services			
Regional Hospitals			
National Core Standards self assessment rate (Regional Hospitals)	100.0%	100.0%	0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	100.0%	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	100.0%	0%
Average Length of Stay (Regional Hospitals)	4.8 days	4.8 days	5.9 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	72.0%	72.0%	89.8%
Expenditure per PDE (Regional Hospitals)	R 3 400	R 3 400	R 3 587
Complaints resolution rate (Regional Hospitals)	100.0%	100.0%	42.9%
Complaint Resolution within 25 working days rate (Regional Hospitals)	80.0%	80.0%	100.0%
Specialised Hospitals			
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	100.0%	100.0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	100.0%	100.0%	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	100.0%	0%
Complaints resolution rate (Specialised Hospitals)	100.0%	100.0%	100.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	80.0%	80.0%	100.0%
Programme 5: Central Hospital Services (C&THS)			
Provincial Tertiary Hospitals Services			
National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	100.0%	100.0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Tertiary Hospitals)	100.0%	100.0%	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100.0%	100.0%	0%
Average Length of Stay (Tertiary Hospitals)	6.2 days	6.2 days	6.5 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	72.0%	72.0%	69.3%
Expenditure per PDE (Tertiary Hospitals)	R 3 923	R 3 923	R 4 329
Complaints resolution rate (Tertiary Hospitals)	100.0%	100.0%	82.4%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	80.0%	80.0%	92.9%
Provincial Central Hospitals Services			
National Core Standards self assessment rate (Central Hospitals)	-	-	-
Quality improvement plan after self assessment rate (Central Hospitals)	-	-	-
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Central Hospitals)	-	-	-
Patient Satisfaction Survey Rate (Central Hospitals)	-	-	-
Average Length of Stay (Central Hospitals)	-	-	-
Inpatient Bed Utilisation Rate (Central Hospitals)	-	-	-
Expenditure per PDE (Central Hospitals)	-	-	-
Complaints resolution rate (Central Hospitals)	-	-	-
Complaint Resolution within 25 working days rate (Central Hospitals)	-	-	-

1. Information submitted by: E. Botes Head of Department: Health Northern Cape: Tel: (053) 830 0806

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

*This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

NORTH WEST

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 1: Administration			
Percentage of Hospitals with broadband access	33.0%	-	0%
Percentage of fixed PHC facilities with broadband access	15.0%	-	0%
Programme 2: District Health Services			
District Management			
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	40.0%	25.0%	19.6%
Client Satisfaction Survey Rate (PHC)	75.0%	-	0%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	-	-	-
PHC utilisation rate	2.2	2.2	2.2
Complaints resolution rate (PHC)	86.0%	86.0%	92.9%
Complaint resolution within 25 working days rate (PHC)	85.0%	85.0%	98.8%
District Hospitals			
National Core Standards self assessment rate (District Hospitals)	100.0%	100.0%	100.0%
Quality improvement plan after self assessment rate (District Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (District Hospitals)	33.0%	-	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	-	0%
Average Length of Stay (District Hospitals)	2-4 days	2-4 days	4.9 days
Inpatient Bed Utilisation Rate (District Hospitals)	65%-70%	65%-70%	35.2%
Expenditure per PDE (District Hospitals)	R2400 - R2500	R2400-R2500	R 3 162
Complaints resolution rate (District Hospitals)	85.0%	85.0%	93.3%
Complaint Resolution within 25 working days rate (District Hospitals)	93.0%	93.0%	98.2%
HIV and AIDS, STI and TB (HAST)			
Adults remaining on ART – Total	209 931	178 441	193 627
Total Children (under 15 years) remaining on ART – Total	13 400	11 390	11 146
TB/HIV co-infected client on ART rate	85.0%	85.0%	62.1%
Client tested for HIV (incl ANC)	843 193	210 798	191 015
TB symptom 5yrs and older screened rate	75.0%	75.0%	0%
Male condom distribution Coverage	38	38	22
Medical male circumcision performed - Total	48 774	12 194	2 861
TB client treatment success rate	85.0%	85.0%	84.4%
TB client lost to follow up rate	5.0%	5.0%	0.8%
Maternal, Child and Women's Health and Nutrition (MCWH&N)			
Antenatal 1st visit before 20 weeks rate	65.0%	65.0%	63.8%
Mother postnatal visit within 6 days rate	80.0%	80.0%	75.3%
Infant 1st PCR test positive around 10 weeks rate	2.0%	2.0%	4.2%
Immunisation under 1 year coverage (annualised)	90.0%	90.0%	71.0%
Measles 2nd dose coverage (annualised)	90.0%	90.0%	72.0%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	5.0%	5.0%	-22.6%
Child under 5 years diarrhoea case fatality rate	3.2%	3.2%	7.0%
Child under 5 years pneumonia case fatality rate	3.0%	3.0%	3.0%
Child under 5 years severe acute malnutrition case fatality rate	10.0%	10.0%	17.0%
School Grade 1 screening coverage (annualised)	50.0%	20.0%	91.8%
School Grade 8 screening coverage (annualised)	30.0%	10.0%	69.8%
Couple year protection rate (annualised)	40.0%	40.0%	32.5%
Cervical cancer screening coverage (annualised)	70.0%	70.0%	58.8%
Vitamin A 12-59 months coverage (annualised)	55.0%	55.0%	54.5%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	40.0%	40.0%	31.1%
Disease Prevention and Control			
Clients screened for hypertension	700 000	180 000	356 999
Clients screened for diabetes	415 000	100 000	249 632
Client screened for Mental Health	145 000	30 000	106 644
Cataract Surgery Rate annualised	600.0	600.0	520.4
Malaria case fatality rate	-	-	0%
Programme 3: Emergency Medical Services (EMS)			
EMS P1 urban response under 15 minutes rate	50.0%	50.0%	42.6%
EMS P1 rural response under 40 minutes rate	50.0%	50.0%	49.5%
EMS inter-facility transfer rate	30.0%	30.0%	34.9%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter
NORTH WEST
Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 4: Provincial Hospital Services			
Regional Hospitals			
National Core Standards self assessment rate (Regional Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	66.0%	-	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	-	0%
Average Length of Stay (Regional Hospitals)	7 days	7 days	5.3 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	85.0%	85.0%	44.8%
Expenditure per PDE (Regional Hospitals)	R 2 500	R 2 500	R 1 685
Complaints resolution rate (Regional Hospitals)	75.0%	75.0%	125.0%
Complaint Resolution within 25 working days rate (Regional Hospitals)	90.0%	90.0%	80.0%
Specialised Hospitals			
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	50.0%	-	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	100.0%	0%
Complaints resolution rate (Specialised Hospitals)	90.0%	90.0%	100.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	90.0%	90.0%	100.0%
Programme 5: Central Hospital Services (C&THS)			
Provincial Tertiary Hospitals Services			
National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Tertiary Hospitals)	100.0%	-	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100.0%	-	0%
Average Length of Stay (Tertiary Hospitals)	7 days	7 days	6.8 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	83%-88%	83%-88%	37.7%
Expenditure per PDE (Tertiary Hospitals)	R 2 600	R 2 600	R 4 016
Complaints resolution rate (Tertiary Hospitals)	80.0%	80.0%	93.9%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	90.0%	90.0%	100.0%
Provincial Central Hospitals Services			
National Core Standards self assessment rate (Central Hospitals)	-	-	-
Quality improvement plan after self assessment rate (Central Hospitals)	-	-	-
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Central Hospitals)	-	-	-
Patient Satisfaction Survey Rate (Central Hospitals)	-	-	-
Average Length of Stay (Central Hospitals)	-	-	-
Inpatient Bed Utilisation Rate (Central Hospitals)	-	-	-
Expenditure per PDE (Central Hospitals)	-	-	-
Complaints resolution rate (Central Hospitals)	-	-	-
Complaint Resolution within 25 working days rate (Central Hospitals)	-	-	-

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

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

*This province does not have Central Hospitals

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter
WESTERN CAPE
Sector: Health
Programme / Subprogramme / Performance Measures
**Target for 2016/17
as per
Annual
Performance
Plan (APP)**
**1st Quarter
Planned output
as per APP**
**1st Quarter
Preliminary
output**
QUARTERLY OUTPUTS
Programme 1: Administration

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

 46.3% 42.9% 50.0%
 25.3% 26.1% 66.7%

Programme 2: District Health Services
District Management

 Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard
 Client Satisfaction Survey Rate (PHC)
 Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)

 14.5% 5.0% 2.6%
 84.4% 1.1% 0%
 Not applicable in the Not applicable in Not applicable in
 W Cape the W Cape WC

 PHC utilisation rate
 Complaints resolution rate (PHC)
 Complaint resolution within 25 working days rate (PHC)

 2.3 2.2 2.3
 92.4% 91.9% 92.2%
 95.3% 94.8% 97.2%
District Hospitals

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

 100.0% - 5.9%
 97.1% - 50.0%
 8.8% - 50.0%
 100.0% - 0%
 3.3 days 3.3 days 3.2 days
 90.4% 90.9% 86.3%
 R 2 015 R 2 032 R 1 928
 93.2% 92.8% 96.0%
 92.4% 92.8% 91.1%
HIV and AIDS, STI and TB (HAST)

 Adults remaining on ART – Total
 Total Children (under 15 years) remaining on ART – Total
 TB/HIV co-infected client on ART rate
 Client tested for HIV (incl ANC)
 TB symptom 5yrs and older screened rate
 Male condom distribution Coverage
 Medical male circumcision performed - Total
 TB client treatment success rate
 TB client lost to follow up rate

 214 978 185 872 198 484
 8 521 7 735 8 075
 88.3% 87.5% 89.4%
 1247 531 290 363 323 867
 14.6% 14.4% 24.8%
 46 44 49
 33 741 8 625 2 522
 86.0% 85.4% 83.8%
 7.9% 7.1% 9.6%
Maternal, Child and Women's Health and Nutrition (MCWH&N)

 Antenatal 1st visit before 20 weeks rate
 Mother postnatal visit within 6 days rate
 Infant 1st PCR test positive around 10 weeks rate
 Immunisation under 1 year coverage (annualised)
 Measles 2nd dose coverage (annualised)
 DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate
 Child under 5 years diarrhoea case fatality rate
 Child under 5 years pneumonia case fatality rate
 Child under 5 years severe acute malnutrition case fatality rate
 School Grade 1 screening coverage (annualised)
 School Grade 8 screening coverage (annualised)
 Couple year protection rate (annualised)
 Cervical cancer screening coverage (annualised)
 Vitamin A 12-59 months coverage (annualised)
 Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate

 66.9% 66.8% 68.0%
 77.4% 76.7% 54.1%
 1.3% 1.3% 0.7%
 98.3% 97.7% 89.4%
 79.9% 78.1% 119.2%
 2.6% 2.6% -63.5%
 0.2% 0.1% 0.4%
 0.3% 0.3% 0.3%
 1.7% 1.8% 0%
 41.5% 43.3% 70.0%
 11.1% 10.6% 25.4%
 61.1% 62.3% 60.1%
 57.6% 54.8% 52.3%
 48.1% 47.4% 55.4%
 28.2% 22.5% 30.7%
Disease Prevention and Control

 Clients screened for hypertension
 Clients screened for diabetes
 Client screened for Mental Health
 Cataract Surgery Rate annualised
 Malaria case fatality rate

 8 210 2 053 16 857
 41 049 10 262 13 437
 0 0 -
 1 661.0 1 684.0 1 829.4
 2.3% 1.7% 0%
Programme 3: Emergency Medical Services (EMS)

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

 67.0% 67.0% 58.7%
 84.0% 84.0% 79.8%
 40.0% 40.0% 41.4%

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

WESTERN CAPE

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
QUARTERLY OUTPUTS			
Programme 4: Provincial Hospital Services			
Regional Hospitals			
National Core Standards self assessment rate (Regional Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	-	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	-	0%
Average Length of Stay (Regional Hospitals)	3.9 days	3.9 days	3.9 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	84.7%	86.7%	89.5%
Expenditure per PDE (Regional Hospitals)	R 3 039	R 2 927	R 2 674
Complaints resolution rate (Regional Hospitals)	99.0%	98.9%	100.0%
Complaint Resolution within 25 working days rate (Regional Hospitals)	98.3%	98.9%	96.8%
Specialised Hospitals			
National Core Standards self assessment rate (Specialised Hospitals)	90.9%	-	0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	40.0%	-	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	-	0%
Complaints resolution rate (Specialised Hospitals)	99.5%	98.0%	100.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	98.4%	98.0%	100.0%
Programme 5: Central Hospital Services (C&THS)			
Provincial Tertiary Hospitals Services			
National Core Standards self assessment rate (Tertiary Hospitals)	Yes	No	0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	Yes	No	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	Yes	No	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	Yes	No	0%
Average Length of Stay (Tertiary Hospitals)	4.0 days	4.0 days	4.0 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	83.0%	83.6%	85.9%
Expenditure per PDE (Tertiary Hospitals)	R 5 485	R 5 485	R 4 801
Complaints resolution rate (Tertiary Hospitals)	96.0%	95.5%	100.0%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	83.0%	83.3%	92.3%
Provincial Central Hospitals Services			
National Core Standards self assessment rate (Central Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Central Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards	100.0%	-	0%
Patient Satisfaction Survey Rate (Central Hospitals)	100.0%	-	0%
Average Length of Stay (Central Hospitals)	6.2 days	6.2 days	6.5 days
Inpatient Bed Utilisation Rate (Central Hospitals)	86.5%	86.9%	87.7%
Expenditure per PDE (Central Hospitals)	R 4 870	R 4 870	R 4 382
Complaints resolution rate (Central Hospitals)	88.5%	88.6%	96.1%
Complaint Resolution within 25 working days rate (Central Hospitals)	86.6%	86.6%	93.9%

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

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