



**health**

Department:  
Health  
PROVINCE OF KWAZULU-NATAL

UMNYANGO WEZEMPILO  
KWAZULU-NATAL  
UNSUMPA JIKELELE  
2608/16 28 JUL 2016  
HEAD OF DEPARTMENT  
DEPARTMENT OF HEALTH  
KWAZULU-NATAL

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**DIRECTORATE:**  
DATA MANAGEMENT & GIS  
SERVICES

**INTERNAL MEMO**

Date: 28 July 2016	File No:
To: Dr ST Mtshali Head of Department	From: Mr. J Govender Chief Director: Health Services Delivery, Planning, Monitoring and Evaluation
Subject: Verification of health non-financial information to be published for the first quarter of the 2016/17 financial year	

Dr Mtshali,

1. Correspondence received from the Provincial Treasury regarding the certifying and approval of the Quarterly Treasury Report refers.
2. It is requested that the Head of Department signs Annexure 1 as indicated for onward submission to the Head of Treasury. The data table has been verified by this unit and is reflective of the preliminary data for Quarter 1 of 2016/2017.

Thank you,

Kind regards,

Mr. Jack Govender  
Chief Director  
Health Services Delivery Planning Monitoring and Evaluation

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
<b>QUARTERLY OUTPUTS</b>			
<b>Programme 4: Provincial Hospital Services</b>			
<b>Regional Hospitals</b>			
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 (Regional Hospitals)	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%
<b>Specialised Hospitals</b>			
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%	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%
<b>Programme 5: Central Hospital Services (C&amp;THS)</b>			
<b>Provincial Tertiary Hospitals Services</b>			
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%
<b>Provincial Central Hospitals Services</b>			
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%

Please note that some numbers may have been rounded off.

I, ST. Mtholo hereby certify that the non-financial data submitted for the current quarter is correct and gives an overview of the performance of the department.

Signed by: Head of the Health Department .....

Date: 29, 07, 2016

I, P.S. Khumalo hereby certify that the non-financial data submitted for the current quarter is correct and gives an overview of the performance of the department.

Signed by: Director General - Office of the Premier Kwazulu-Natal

Date: 02, 08, 2016

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
<b>QUARTERLY OUTPUTS</b>			
<b>Programme 1: Administration</b>			
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%
<b>Programme 2: District Health Services</b>			
<b>District Management</b>			
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%
OHH registration visit coverage (annualised)	25.0%	6.3%	3.6%
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%
<b>District Hospitals</b>			
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	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%
<b>HIV and AIDS, STI and TB (HAST)</b>			
Adults remaining on ART - Total	1 205 438	1 027 525	1 000 515
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%
<b>Maternal, Child and Women's Health and Nutrition (MCWH&amp;N)</b>			
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%
<b>Disease Prevention and Control</b>			
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	1 033 007
Cataract Surgery Rate annualised	1154/1mil	683/1mil	432
Malaria case fatality rate	<0.5%	<0.5%	2.1%
<b>Programme 3: Emergency Medical Services (EMS)</b>			
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%

*PAK*



**DEPARTMENT OF PLANNING, MONITORING AND EVALUATION**

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The Head Officials  
Provincial Department of Health and Agriculture

The Director General  
Office of the Premier

Dear Colleague

**VERIFICATION OF HEALTH AND AGRICULTURE'S NON-FINANCIAL INFORMATION TO BE PUBLISHED FOR THE FIRST QUARTER OF THE 2016/17 FINANCIAL YEAR ENDED 30 JUNE 2016**

Section 27(4) of the PFMA requires that: "The Accounting Officer for each department submits to Parliament or the relevant Legislature as may be appropriate, strategic objectives for each main division within a department's vote". Offices of the Premier coordinate the quarterly performance reporting process where departments report quarterly to them on progress made against planned annual targets per objective as contained in the annual performance plans.

Attached, please find a copy of the tables reflecting the first quarter preliminary performance information of the departments of Health and Agriculture. This data will be published on the website of the Department of Planning, Monitoring and Evaluation (DPME).

You are kindly requested to verify and certify the data reflected in the tables. The first quarter data will be published as preliminary performance information. The first quarter actual data and second quarter preliminary data will be published at the end of the second quarter.

The signed-off tables should be submitted by facsimile or scanned and e-mailed to [Samu@dpme.gov.za](mailto:Samu@dpme.gov.za) by no later than Thursday, 4 August 2016. This will allow the DPME to consolidate and package this information for publication on the website of DPME.

In instances where the Head of the department of Health, Agriculture or Director General: Office of the Premier is not available, alternative arrangements will have to be made in order to ensure that the data to be published is signed-off within the prescribed timeframes.

It is also requested by the Auditor-General that Offices of the Premier submit to the DPME a complete set of original signed performance information that will be published. This complete set of signed reports must be posted (couriered) rather than faxed as it will ensure that the figures and signatures are distinguishable and clear, adding to the accountability process.

Your urgent attention would be highly appreciated.

Kind regards

Moodley

Edeshri Moodley

CHIEF DIRECTOR: GOVERNMENT PERFORMANCE INFORMATION

Date: 27/07/16