

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 4th Quarter
KWAZULU-NATAL
Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter 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									
Percentage of Hospitals with broadband access	50.0%	45.0%	47.1%	46.0%	47.1%	48.0%	45.8%	50.0%	47.2%
Percentage of fixed PHC facilities with broadband access	50.0%	45.0%	4.7%	47.0%	19.7%	48.0%	19.7%	50.0%	26.0%
Programme 2: District Health Services									
District Management									
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	40.0%	15.0%	24.6%	20.0%	40.4%	30.0%	40.4%	40.0%	62.6%
Client Satisfaction Survey Rate (PHC)	100.0%	25.0%	38.5%	50.0%	14.0%	75.0%	24.1%	100.0%	20.8%
OHH registration visit coverage (annualised)	25.0%	6.3%	6.6%	12.6%	7.3%	18.9%	5.2%	25.0%	2.7%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	2	3.0	2.8	3.0	2.8	3.0	2.6	3.0	2.5
PHC utilisation rate	85.0%	80.0%	84.9%	80.0%	86.5%	83.0%	89.3%	85.0%	83.0%
Complaints resolution rate (PHC)	95.0%	94.5%	94.7%	95.0%	95.1%	95.0%	98.3%	95.0%	95.2%
Compliant resolution within 25 working days rate (PHC)									
District Hospitals									
National Core Standards self assessment rate (District Hospitals)	100.0%	25.0%	42.1%	50.0%	5.3%	75.0%	36.8%	100.0%	15.8%
Quality improvement plan self assessment rate (District Hospitals)	100.0%	25.0%	56.3%	50.0%	0%	75.0%	64.3%	100.0%	150.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core	21.0%	5.0%	25.0%	10.0%	0%	15.0%	0%	21.0%	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	25.0%	73.7%	73.7%	23.7%	75.0%	36.8%	100.0%	18.4%
Average Length of Stay (District Hospitals)	6.0 days	6.3 days	5.5 days	6.2 days	5.5 days	6.2 days	5.4 days	6.0 days	5.5 days
Inpatient Bed Utilisation Rate (District Hospitals)	65.8%	63.0%	58.4%	64.0%	58.8%	65.0%	56.7%	65.8%	61.6%
Expenditure per PDE (District Hospitals)	R 1 947	R 2 000	R 2 229	R 1 967	R 2 171	R 1 957	R 2 277	R 1 947	R 2 278
Complaints resolution rate (District Hospitals)	80.0%	75.0%	86.5%	77.0%	84.8%	79.0%	98.1%	80.0%	76.7%
Compliant resolution within 25 working days rate (District Hospitals)	95.0%	92.0%	92.1%	93.0%	95.1%	94.0%	97.4%	95.0%	94.0%
HIV and AIDS, STI and TB (HAST)									
Adults remaining on ART - Total	1 205 438	1 027 525	1 025 723	1 086 829	1 073 062	1 146 133	1 104 692	1 205 438	1 023 121
Total Children (under 15 years) remaining on ART - Total	68 286	60 153	53 668	62 864	55 011	65 575	55 974	68 286	54 221
TB/HIV co-infected client on ART rate	90.0%	85.0%	86.3%	87.0%	61.5%	89.0%	57.1%	90.0%	56.2%
Client tested for HIV (incl ANC)	2 659 268	664 817	690 985	1 329 634	834 732	1 994 451	784 478	2 659 268	753 170
TB symptom 5yrs and older screened rate	35.0%	9.0%	69.3%	18.0%	77.9%	27.0%	79.9%	35.0%	81.9%
Male condom distribution coverage	62	50	49	54	58	58	53	62	42
Medical male circumcision performed - Total	793 528	652 814	33 850	699 718	35 275	746 622	21 984	793 528	20 736
TB client treatment success rate	86.0%	86.0%	86.3%	86.0%	86.6%	86.0%	87.1%	86.0%	88.6%
TB client lost to follow up rate	3.4%	3.8%	4.0%	3.6%	3.7%	3.5%	4.4%	3.4%	4.2%
Maternal, Child and Women's Health and Nutrition (MCWH&N)									
Antenatal 1st visit before 20 weeks rate	62.6%	62.0%	67.2%	62.3%	70.9%	62.5%	71.7%	62.6%	66.8%
Mother postnatal visit within 6 days rate	82.0%	73.0%	62.3%	76.0%	65.9%	79.0%	68.5%	82.0%	68.1%
Infant 1st PCR test positive around 10 weeks rate	<1%	<1%	1.6%	<1%	0.5%	<1%	1.1%	<1%	2.3%
Immunisation under 1 Year coverage (annualised)	92.0%	90.0%	80.8%	90.1%	88.3%	90.5%	80.7%	92.0%	88.0%
Measles 2nd dose coverage (annualised)	6.0%	7.1%	97.9%	89.0%	110.7%	89.5%	92.9%	90.0%	89.4%
DTaP-IPV-Hib-HBV 3 - Measles 1st dose drop-out rate	2.8%	2.9%	32.2%	2.2%	6.8%	6.4%	7.1%	6.0%	0.0%
Child under 5 years diarrhoea case fatality rate	3.0%	3.2%	2.2%	2.9%	1.5%	2.9%	1.9%	2.8%	2.0%
Child under 5 years severe acute malnutrition case fatality rate	8.0%	8.7%	2.1%	3.1%	2.2%	3.1%	1.3%	3.0%	1.6%
School Grade 1 screening coverage (annualised)	25.0%	6.5%	62.1%	8.4%	8.5%	8.2%	6.0%	8.0%	8.7%
School Grade 8 screening coverage (annualised)	20.0%	5.0%	55.1%	13.0%	19.1%	19.5%	20.3%	25.0%	2.8%
Couple year protection rate (annualised)	60.0%	1	40.0%	10.0%	9.9%	15.0%	8.6%	20.0%	4.7%
Cervical cancer screening coverage (annualised)	75.0%	73.4%	49.5%	53.0%	55.4%	57.0%	53.3%	60.0%	46.5%
Vitamin A 12-59 months coverage (annualised)	65.0%	65.0%	75.5%	74.0%	92.6%	75.0%	83.6%	75.0%	102.2%
Infant exclusively breastfed at HcPB (DTaP-IPV-Hib-HBV) 3rd dose rate	55.0%	52.0%	54.2%	53.0%	55.3%	54.0%	53.9%	55.0%	51.6%
Disease Prevention and Control									
Clients screened for hypertension	7 980 052	1 995 013	2 480 126	3 990 026	2 715 393	5 985 039	2 547 834	7 980 052	2 626 826
Clients screened for diabetes	5 127 276	1 281 819	2 305 898	2 563 638	2 592 412	3 845 457	2 536 944	5 127 276	2 683 853
Cataract Surgery Rate annualised	100 000	25 000	1 162 508	50 000	1 544 689	75 000	1 811 048	100 000	1 889 460
Malaria case fatality rate	1154/1mil	683/1mil	511	809/1mil	519	935/1mil	757	1154/1mil	2 789
Programme 3: Emergency Medical Services (EMS)									
EMS P1 urban response under 15 minutes rate	<0.5%	<0.5%	2.1%	<0.5%	0%	<0.5%	0%	<0.5%	1.5%
EMS P1 rural response under 40 minutes rate	6.0%	5.0%	4.4%	5.0%	4.6%	6.0%	5.2%	6.0%	5.9%
EMS inter-facility transfer rate	40.0%	41.0%	31.0%	40.0%	31.0%	40.0%	28.9%	40.0%	30.9%

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Programme 4: Provincial Hospital Services									
Regional Hospitals									
National Core Standards self assessment rate (Regional Hospitals)	100.0%	25.0%	76.9%	50.0%	7.7%	75.0%	38.5%	100.0%	30.8%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	25.0%	50.0%	50.0%	0%	75.0%	80.0%	100.0%	75.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Regional Hospitals)	25.0%	0%	30.0%	0%	0%	15.0%	40.0%	25.0%	100.0%
Specialised Hospitals									
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	25.0%	36.8%	50.0%	10.5%	75.0%	21.1%	100.0%	0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	25.0%	14.3%	50.0%	0%	75.0%	25.0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	22.0%	0%	47.4%	50.0%	18.8%	0%	0%	100.0%	0%
Patent Satisfaction Survey Rate (Regional Hospitals)	100.0%	25.0%	46.8%	82.5%	90.8%	83.0%	87.1%	83.2%	21.1%
Average Length of Stay (Regional Hospitals)	6.5 days	6.3 days	6.1 days	6.3 days	6.4 days	6.5 days	6.0 days	6.5 days	6.3 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	70.5%	67.6%	73.9%	68.0%	72.5%	69.5%	70.5%	70.5%	72.7%
Expenditure per PDE (Regional Hospitals)	R 2 822	R 2 822	R 3 031	R 2 822	R 2 863	R 2 522	R 2 997	R 2 822	R 3 145
Complaints resolution rate (Regional Hospitals)	86.0%	83.0%	75.1%	83.5%	58.2%	84.5%	76.4%	86.0%	81.5%
Complaints Resolution within 25 working days rate (Regional Hospitals)	97.5%	97.2%	97.9%	97.3%	86.3%	97.4%	87.7%	97.5%	98.2%
Provincial Central Hospitals Services									
National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	0%	33.3%	0%	0%	33.0%	0%	100.0%	0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	0%	0%	0%	0%	33.0%	0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Tertiary Hospitals)	33.0%	0%	100.0%	0%	33.3%	0%	66.7%	33.0%	33.3%
Patent Satisfaction Survey Rate (Central Hospitals)	100.0%	0%	100.0%	0%	0%	0%	0%	100.0%	0%
Average Length of Stay (Central Hospitals)	7.7 days	7.7 days	8.0 days	7.7 days	7.7 days	7.7 days	7.5 days	7.7 days	7.5 days
Inpatient Bed Utilisation Rate (Central Hospitals)	78.9%	77.0%	76.7%	77.5%	76.2%	78.0%	78.0%	78.9%	90.8%
Expenditure per PDE (Central Hospitals)	R 2 894	R 2 894	R 3 203	R 2 894	R 3 348	R 2 894	R 3 775	R 2 894	R 4 561
Complaints resolution rate (Tertiary Hospitals)	85.0%	84.0%	86.0%	84.5%	80.0%	84.5%	53.8%	85.0%	77.5%
Complaints Resolution within 25 working days rate (Tertiary Hospitals)	100.0%	100.0%	93.9%	100.0%	95.6%	100.0%	100.0%	100.0%	100.0%
Provincial Central Hospitals Services									
National Core Standards self assessment rate (Central Hospitals)	100.0%	0%	100.0%	0%	100.0%	0%	0%	100.0%	0%
Quality improvement plan after self assessment rate (Central Hospitals)	100.0%	0%	0%	0%	0%	0%	0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Central Hospitals)	100.0%	0%	0%	0%	100.0%	0%	0%	100.0%	0%
Patent Satisfaction Survey Rate (Central Hospitals)	100.0%	0%	0%	0%	0%	0%	0%	100.0%	0%
Average Length of Stay (Central Hospitals)	8.5 days	8.6 days	8.8 days	8.6 days	8.6 days	8.6 days	8.3 days	8.5 days	9.2 days
Inpatient Bed Utilisation Rate (Central Hospitals)	67.1%	67.1%	66.0%	67.1%	67.7%	67.1%	65.0%	67.1%	65.1%
Expenditure per PDE (Central Hospitals)	R 8 173	R 8 100	R 9 493	R 8 150	R 7 976	R 8 161	R 9 282	R 8 173	R 6 700
Complaints resolution rate (Central Hospitals)	80.0%	75.0%	90.5%	76.0%	87.5%	78.0%	89.7%	80.0%	96.3%
Complaints Resolution within 25 working days rate (Central Hospitals)	96.5%	95.5%	100.0%	96.5%	100.0%	96.5%	100.0%	96.5%	100.0%

Please note that some numbers may have been rounded off.

D. S. Mshali

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: 04/05/2017

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

Date: 08/05/2017