



health

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Health
PROVINCE OF KWAZULU-NATAL

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Office of the Head: Health

Dr Nonhlanhla O. Mkhize
Director-General
Office of the Premier
Private Bag X9037
PIETERMARITZBURG
3201

Dear Dr Mkhize

DEPARTMENTAL PRELIMINARY QUARTERLY PERFORMANCE REPORT (Q2)

The above matter refers.

I, Dr M. Gumedde (Acting Head: Health) hereby submit the quarterly performance information for the 1st quarter actual and the 2nd quarter (preliminary) of 2018/19 for publication.

The report accurately reflects the preliminary performance against the targets as set out in the 2018/19 APP of the Department.

Yours sincerely

DR M. GUMEDE
ACTING HEAD; HEALTH
KWAZULU-NATAL

Date:

23/10/2018



health

Department:
Health
PROVINCE OF KWAZULU-NATAL

UMNYANGO WEZEMPILO
KWAZULU-NATAL
UNSUMPA JIKELELE
22 OCT 2018
HEAD OF DEPARTMENT
DEPARTMENT OF HEALTH
KWAZULU-NATAL

1930/18

DIRECTORATE:

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Health Service Delivery Planning,
Monitoring and Evaluation

SUBMISSION

Date: 19 October 2018	File No:
To: Dr M. Gumede Acting Head: Health	From: Mr. J Govender Chief Director: Health Service Delivery Planning, Monitoring and Evaluation
Subject: Quarterly Provincial Report for Treasury: 2018/19 Quarter 2 (Preliminary)	

Aim:

To obtain the signature of the Acting Head: Health, for the submission of the Quarter 2 – 2018/19 Preliminary Quarterly Report to Office of the Premier and the National Department of Health.

Background:

This submission contains the following Annexures:

A	2 nd Quarterly Provincial Report: 2018/19 (Data Elements): Preliminary data
B	1 st Quarterly Provincial Report: 2018/19 (Data Elements): Actual data
C	1 st Quarterly Provincial Report: Narrative

- 1.1 The Acting Head of the Health is requested to certify the data provided as correct.
- 1.2 The attachments must be submitted to Office of the Premier and the National Department of Health.
- 1.3 The attached document is prepared in line with the requirements determined by the National Departments of Treasury, and Health, and the Office of the Premier. Data for the reporting quarter (2nd) is preliminary. Data for the 1st quarter is actual. Data is sourced from the DHIS, TB, HR and Finance systems and units.

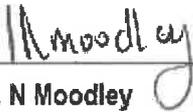
Key Challenges

1. Unsafe vehicles and fear of hijacking has decreased mobiles services impacting negatively on under 5 PHC utilisation rate
2. Poor adherence to National Complaints Management guidelines and the nature of complaints has resulted in low complaint resolution rates especially in Hospitals
3. Inefficiencies noted in Specialised Hospitals – High Average Length of Stay, Low inpatient bed utilisation, High Expenditure per Patient Day Equivalent (PDE)
4. Supplier Challenges resulted in Tracer Medicine stock-outs
5. The model provided by the Department of Planning, Monitoring and Evaluation for the reporting of quarterly

performance results which was received in April 2018 has been found to have formulae errors. These errors impact the result of the indicator which uses the raw data to calculate the result. The unit manually revises the formulae in order to submit the correct data to the relevant Departments. These errors have been communicated with the Office of the Premier and the Department of Planning, Monitoring and Evaluation. The practice of manual correction of formulae will continue until the model is revised.

Declaration

6. Routine data used for the compilation of this report has been submitted timeously to the National Department of Health as per the District Health Management Information System Policy. The data presented in the Treasury Report is seen as a minimum data set signed off by the Acting HoH.



Mrs. N Moodley
Director: Data Management and GIS

Request:

It is requested that the Acting Head: Health signs the Annexures as indicated.



Mr. J Govender
Chief Director: Health Service Delivery Planning, Monitoring and Evaluation

Date: 22/10/18.....

KZN QUARTERLY PERFORMANCE REPORT Q2

KWAZULU-NATAL
 QUARTERLY PERFORMANCE REPORTS: 2018/19 - 2nd Quarter
 Sector: Health

Programmes / Subprogrammes / Performance Measures	Audited Outcome for 2017/18 as per Annual Report	Target for 2018/19 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Preliminary output	Comments for the 1st Quarter
Programme 1: Administration								
Percentage of Hospitals with broadband access	52.1%	58.3%	57.0%	62.1%	60.3%	57.0%	60.3%	
Percentage of fixed PHC facilities with broadband access	21.5%	26.9%	24.6%	21.7%	23.7%	24.6%	23.7%	
Programme 2: District Health Services								
District Management								
PHC utilisation rate - total	7.5	2.6	7.8	1.3	2.6	2.6	2.6	
Complaint resolution within 25 working days rate	89.8%	90.0%	96.0%	96.1%	96.5%	96.0%	96.2%	
District Hospitals								
Hospital achieved 75% and more on National Core Standards (NCS) self assessment rate (District Hospitals)	81.8%	39.0%	7.8%	0%	30.0%	15.8%	90.0%	
Average Length of Stay (District Hospitals)	5.4 days	5.6 days	5.5 days	5.4 days	5.4 days	5.5 days	5.4 days	
Inpatient Bed Utilisation Rate (District Hospitals)	57.2%	60.2%	60.0%	60.6%	59.6%	60.0%	58.8%	
Expenditure per patient-day equivalent (PDE) (District Hospitals)	R 2,482	R 2,542	R 2,501	R 2,418	R 2,528	R 2,531	R 2,677	
Complaint resolution within 25 working days rate (District Hospitals)	92.3%	94.0%	93.5%	92.3%	89.1%	93.5%	87.7%	
HIV & AIDS, STI & TB (HASTI) CONTROL								
ART client remain on ART end of month - total	1,271,116	1,313,864	1,273,160	1,269,616	1,304,196	1,266,705	1,311,076	
TBI/HIV co-infected client on ART rate	89.8%	95.0%	91.5%	87.8%	87.6%	92.9%	87.9%	
HIV test done - total	3 050 729	2 982 771	745 883	826 380	847 094	745 093	940 035	
Male Condoms Distributed	75 595 910	199 500 000	49 874 980	13 362 323	30 749 210	49 874 986	23 709 654	
Medical male circumcision - Total	985 126	140 038	33 605	36 120	51 695	47 430	108 335	
TB client 5 years and older start on treatment rate	105.8%	90.0%	90.0%	111.1%	109.9%	90.0%	108.3%	
TB client treatment success rate	66.6%	67.6%	67.6%	76.9%	76.3%	67.6%	74.9%	
TB Client lost to follow up rate	4.9%	5.0%	5.0%	5.4%	5.8%	5.0%	5.7%	
Maternal, Child and Women's Health and Nutrition (MCWH&N)								
Antenatal 1st visit before 20 weeks rate	72.1%	71.0%	70.2%	71.7%	71.6%	70.3%	72.9%	
Mother postnatal visit within 6 days rate	76.8%	75.0%	74.4%	80.2%	79.4%	74.4%	79.5%	
Infant 1st PCR test positive around 10 weeks rate	0.7%	0.8%	1.0%	0.9%	0.6%	1.0%	0.7%	
Immunisation under 1 year coverage	81.5%	80.0%	78.0%	91.2%	92.5%	77.0%	91.8%	
Measles 2nd dose coverage	77.5%	80.0%	80.0%	81.5%	80.7%	80.0%	79.9%	
Pneumonia case fatality under 5 years rate	2.0%	2.0%	2.4%	3.1%	2.4%	2.3%	2.2%	
Pneumonia case fatality under 5 years rate	2.5%	2.5%	1.0%	2.2%	1.9%	2.9%	2.8%	
Severe acute malnutrition case fatality under 5 years rate	7.7%	6.5%	7.0%	6.5%	7.0%	6.8%	6.3%	
School Grade 1 - learners screened	58 572	85 525	21 361	14 973	15 817	21 367	1 376	
School Grade 8 - learners screened	28 209	55 506	13 877	9 761	7 811	13 877	398	
Delivery in 10 to 19 years in facility rate	17.8%	22.0%	22.0%	17.8%	17.8%	22.0%	18.1%	
Contraceptive Use Rate (CUI)	46.4%	35.0%	34.7%	60.7%	64.3%	34.8%	61.1%	
Vitamin A 1000 12-59 months coverage	68.8%	60.0%	60.0%	76.6%	74.7%	60.0%	72.8%	
Cervical cancer screening coverage 30 years and older	79.4%	82.0%	80.0%	84.1%	83.8%	80.0%	87.2%	
Disease Prevention and Control								
Cataract Surgery Rate	1,034	944 511 ml	236 171 ml	924	936	4 72 211 ml	978	
Malaria case fatality rate	4.4%	0.6%	1.3%	2.4%	1.1%	0.9%	0.9%	
Programme 3: Emergency Medical Services (EMS)								
EMS P1 urban response under 15 minutes rate	23.0%	23.0%	21.6%	33.2%	33.2%	22.5%	34.9%	
EMS P1 rural response under 40 minutes rate	36.2%	38.0%	36.0%	34.3%	36.1%	36.0%	37.2%	
EMS inter-facility transfer rate	39.0%	46.0%	39.0%	37.9%	38.2%	41.0%	39.9%	

KZN QUARTERLY PERFORMANCE REPORT Q2

Programme / Subprogramme / Performance Measures	Audited Outcome for 2017/18 as per Annual Report	Target for 2018/19 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Preliminary output	Comments for the 1st Quarter
Programme A: Provincial Hospital Services								
Regional Hospitals								
Hospital achieved 75% and more on National Core Standards (NCS) self assessment rate (Regional Hospitals)	81.8%	46.2%	7.7%	0%	80.8%	15.4%	91.7%	
Average Length of Stay (Regional Hospitals)	6.3 days	5.8 days	5.7 days	6.3 days	6.3 days	5.7 days	6.3 days	
Inpatient Bed Utilisation Rate (Regional Hospitals)	71.7%	75.2%	73.0%	76.8%	75.0%	73.6%	76.6%	
Expenditure per patient day equivalent (PDE) (Regional Hospitals)	R 3,030	R 3,377	R 3,119	R 2,923	R 3,037	R 3,253	R 3,171	
Complete resolution within 26 working days rate (Regional Hospitals)	94.2%	95.0%	91.0%	64.3%	79.3%	92.0%	82.4%	
Specialised Hospitals								
Hospitals that achieved a performance of 75% or more on National Core Standards self assessment:				0%	80.0%		0%	
Compliant resolution within 26 working days rate				100.0%	104.5%		100.0%	
Programme B: Central Hospital Services								
Provincial Tertiary Hospitals Services								
Hospital achieved 75% and more on National Core Standards (NCS) self assessment rate (Tertiary Hospitals)	100.0%	56.0%	0%	0%	100.0%	0%	100.0%	
Average Length of Stay (Tertiary Hospitals)	7.5 days	6.4 days	9.4 days	8.1 days	8.1 days	9.4 days	8.0 days	
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	67.8%	75.0%	75.0%	69.0%	70.4%	74.0%	70.5%	
Expenditure per patient day equivalent (PDE) (Tertiary Hospitals)	R 3,990	R 4,029	R 3,840	R 3,754	R 3,861	R 3,860	R 4,012	
Complete resolution within 26 working days rate (Tertiary Hospitals)	94.2%	97.0%	97.0%	100.0%	92.9%	97.0%	93.8%	
Provincial Central Hospitals Services								
Hospital achieved 75% and more on National Core Standards (NCS) self assessment rate (Central Hospitals)	100.0%	100.0%	0%	0%	0%	0%	0%	
Average Length of Stay (Central Hospitals)	8.4 days	8.8 days	8.8 days	8.0 days	8.9 days	8.8 days	8.8 days	
Inpatient Bed Utilisation Rate (Central Hospitals)	65.8%	65.8%	65.8%	67.8%	67.4%	66.8%	68.2%	
Expenditure per patient day equivalent (PDE) (Central Hospitals)	R 9,340	R 8,373	R 8,373	R 9,240	R 8,745	R 8,373	R 9,534	
Complete resolution within 26 working days rate (Central Hospitals)	93.0%	95.8%	93.0%	100.0%	100.0%	94.0%	100.0%	
ANNUAL OUTPUT								
Programme 1: Administration								
Audit opinion from Auditor General	Not yet finalised	Unqualified						
Programme 2: District Health Services								
Ideal clinic status rate	100	87						
HIV and AIDS, STI and TB								
TB Client death rate	3.2%	5.0%						
TB MDR treatment success rate	63.1%	60.0%						
Maternal, Child and Women's Health and Nutrition								
Antenatal client start on ART rate	97.2%	97.0%						
HPV 1st dose	37,754	84,150						
HPV 2nd dose	70,224	84,150						
Maternal mortality in facility ratio	101.9	100.0						
Neonatal death in facility rate	12.4	11.5						

KZN QUARTERLY PERFORMANCE REPORT Q2

Programme / Subprogramme / Performance Measures	Audited Outcome for 2017/18 as per Annual Report	Target for 2018/19 as per Annual Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Preliminary output	Comments for the 1st Quarter
Programme 6: Health Sciences and Training (HST) Number of Bursaries awarded to first year medicine students Number of Bursaries awarded to first year nursing students	8 199	30 150						
Programme 3: Health Facilities Management Number of health facilities that have undergone major and minor refurbishment in Ntuli Pilot District Number of health facilities that have undergone major and minor refurbishment outside Ntuli Pilot District	148 454	148 454						

I, Dr. Nwasa Gumeke hereby certify that the non-financial data submitted for the Q1 is correct while Q2 is preliminary and gives an overview of the performance of the department.

Signed by: Head of the Department

Date: 30/10/2018

Programme / Subprogramme / Performance Measures	1st Quarter Planned output as per APP	1st Quarter Preliminary output	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Preliminary output	Comments for the 1st Quarter
Programme 1: Administration Percentage of Hospitals with broadband access Total Number of hospitals with minimum 2 Mbps connectivity Total Number of Hospitals Percentage of fixed PHC facilities with broadband access Total Number of fixed PHC facilities with minimum 1Mbps connectivity Total Number of fixed PHC Facilities		38 73	44 73		44 73	
Programme 2: District Health Services District Management PHC utilisation rate - total PHC headcount under 5 years + PHC headcount 5-9 years + PHC headcount 10-19 years + PHC headcount 20 years and older Population - Total Complaint resolution within 25 working days rate Complaint resolved within 25 working days Complaint resolved		2,440,882 11,379,875	7,265,005 11,979,875		12,154,486 11,379,875	
District Hospitals Hospital achieved 75% and more on National Core Standards (NCS) self assessment rate (District Hospitals) Hospital achieved 75% and more on National Core Standards self assessment Hospitals conducted National Core Standards self assessment Average Length of Stay (District Hospitals) Inpatient day total Day patient total Inpatient separations Inpatient discharges-total Inpatient deaths -total Inpatient transfers out - total Inpatient Bed Utilisation Rate (District Hospitals)		573 596	857 888		1,427 1,484	
		-	20 25		20 25	
		292,152 2,747	437,377 4,266		727,571 7,228	
		54,281	80,714		135,143	
		47,788 2,918 3,575	71,109 4,382 5,213		119,215 7,019 8,909	

KZN QUARTERLY PERFORMANCE REPORT Q2

Programme / Subprogramme / Performance Measures	Audited Outcome for 2017/18 as per Annual Report	Target for 2018/19 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Preliminary output	Comments for the 1st Quarter
Report on Non Standardized Items								
Inpatient day total			232 152	232 152	437 077		727 571	
Day patient total			2 747	4 266	4 266		7 228	
Usable (Inpatient) beds			7 954	8 077	8 077		8 038	
Expenditure per patient day equivalent (PDE) (District Hospitals)								
Expenditure total			1020812 984	1600696 185	1600696 185		28 0883 873	
Patient day equivalent			422 110	633 230	633 230		1050 016	
OPD headcount not referred now			68 202	101 841	101 841		164 866	
OPD headcount referred now			65 052	93 967	93 967		157 426	
OPD headcount follow-up			21 041	319 310	319 310		523 800	
Emergency Headcount total			41 429	67 143	67 143		110 783	
Complaint resolution within 25 working days rate (District Hospitals)								
Complaint resolved within 25 working days			274	488	488		824	
Complaint resolved			237	548	548		840	
HIV and AIDS, STI and TB (HAST)								
ART client remain on ART end of month - total								
ART child under 15 years remain on ART end of period			1215 396	1264 062	1264 062		1260 503	
ART adult remain on ART end of period			54 220	49 834	49 834		50 573	
TB/HIV co-infected client on ART rate								
TB/HIV co-infected client on ART			8 986	8 887	8 887		16 468	
TB client known HIV positive			10 211	10 150	10 150		18 728	
HIV test done - total								
Antenatal client HIV 1st test			550 920	847 384	847 384		626 680	
Antenatal client HIV re-test			27 325	38 320	38 320		27 804	
HIV test 13-59 months			28 191	43 384	43 384		30 490	
HIV test 6-14 years			19 639	29 453	29 453		20 730	
HIV test 15 years and older (total ANC)			33 845	57 307	57 307		41 822	
Male Condoms Distributed			441 900	877 880	877 880		506 844	
Male condoms distributed			8908 215	30749 210	30749 210		15806 436	
Medical male circumcision - Total								
Males 10 to 14 years who are circumcised			14,869	32,470	32,470		17,859	
Males 15 years and older who are circumcised under medical supervision			9,411	19,228	19,228		13,981	
TB client 5 years and older start on treatment rate								
TB client 5 years and older start on treatment			6 453	9 902	9 902		16 764	
TB symptomatic client 5 years and older tested positive			5 007	9 007	9 007		15 480	
TB client treatment success rate								
TB client successfully completed treatment			12 374	12 289	12 289		21 934	
TB client start on treatment			16 090	16 107	16 107		29 277	
TB Client lost to follow up rate								
TB client lost to follow up			865	942	942		1 657	
TB client start on treatment			16 090	16 107	16 107		29 277	
Maternal, Child and Women's Health and Nutrition (MCWH&N)								
Antenatal 1st visit before 20 weeks rate								
Antenatal 1st visit before 20 weeks			26 053	38 144	38 144		65 795	
Antenatal 1st visit 20 weeks or later + Antenatal 1st visit before 20 weeks			36 329	53 243	53 243		90 312	
Mother postnatal visit within 6 days rate								
Mother postnatal visit within 6 days after delivery			25 184	38 159	38 159		65 714	
Delivery in facility total			31 387	48 056	48 056		80 173	
Infant 1st PCR test positive around 10 weeks rate								
Infant PCR test positive around 10 weeks			80	83	83		156	
Infant PCR test positive around 10 weeks			8 963	13 683	13 683		22 553	
Immunisation under 1 year coverage								
Immunised fully under 1 year new			39 012	59 335	59 335		98 195	
Females under 1 year - Male under 1 year			256 707	256 707	256 707		256 707	

KZN QUARTERLY PERFORMANCE REPORT Q2

Programme / Subprogramme / Performance Measures	Audited Outcomes for 2017/18 as per Annual Report	Target for 2018/19 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Preliminary output	Comments for the 1st Quarter
Measles 2nd dose coverage Measles 2nd dose Female 1 year + Male 1 year Diarrhoea case fatality under 5 years rate Diarrhoea death under 5 years Diarrhoea separation under 5 years rate Pneumonia case fatality under 5 years rate Pneumonia death under 5 years Pneumonia separation under 5 years Severe acute malnutrition case fatality under 5 years rate Severe acute malnutrition (SAM) death in facility under 5 years Severe Acute Malnutrition under 5 years School Grade 1 - learners screened School Grade 1 - learners screened School Grade 8 - learners screened School Grade 8 - learners screened Delivery in 10 to 19 years in facility rate Delivery 10-14 years in facility + Delivery 15-19 years in facility Delivery in facility total Couple Year Protection Rate (int) Contraceptive years equivalent Male sterilisation Female sterilisation Medroxyprogesterone injection Nexthisterone enanthate injection Oral pill cycle IUCD Male condoms Subdermal implant Female condoms Female 15-44 years + Female 45-49 years Vitamin A dose 12-59 months coverage Vitamin A dose 12-59 months (Female 1 year + Female 02-04 years + Male 1 year + Male 02-04 years) * 2 Cervical cancer screening coverage 30 years and older Cervical cancer screening 30 years and older (Female 30-34 years + Female 35-39 years + Female 40-44 years + Female 45 years and older) * 10				35 730 263 068	53 042 263 068		67 039 263 068	
				30 977	35 1 443		67 3 103	
				46 2 068	57 2 635		118 4 239	
				34 523	55 782		79 1 256	
				9 982	15 817		917	
				8 507	7 811		265	
				5 583 31 397	8 665 48 086		14 480 80 173	
				308 948 0	491 393 9		777 667 21	
				9 602 191 207	2 718 298 285		4 464 513 974	
				58 851 68 375 4 688	24 339 105 692 5 817		128 830 156 479 10 268	
			890R 215 21 783	30749 210 30 264		46355 646 47 256		
			145 659 3054 781	813 120 3654 781		2153 168 3654 781		
			274 652 1076 034	402 141 1676 034		652 914 1076 034		
			33 090 2359 710	49 161 2359 710		65 700 2359 710		
Disease Prevention and Control Cataract Surgery Rate Cataract surgery total Population uninsured (ole)				1 542 10014 290	2 269 10014 290		4 081 10014 290	
				6 248	4 353		5 676	
Malaria case fatality rate Deaths from malaria Total number of Malaria cases reported Programme 3: Emergency Medical Services (EMS) EMS P1 urban response under 15 minutes rate				9 079 27 380	9 079 27 380		19 638 56 304	
				18 414 53 632	17 947 49 657		35 660 95 772	
EMS P1 rural response under 40 minutes rate EMS P1 total calls EMS Inter-facility transfer rate EMS Inter-facility transfer EMS clients total				47 710 125 965	47 113 123 335		96 384 241 770	



KZN QUARTERLY PERFORMANCE REPORT Q2

Programme / Subprogramme / Performance Measures	Audited Outcome for 2017/18 as per Annual Report	Target for 2018/19 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Preliminary output	Comments for the 1st Quarter
Programme 4: Provincial Hospital Services								
General (Regional) hospitals								
Hospital achieved 75% and more on National Core Standards (NCS) self assessment rate (Regional Hospitals)					10		11	
Hospital achieved 75% and more on National Core Standards self assessment					11		12	
Average Length of Stay (Regional Hospitals)								
Hospitals conducted National Core Standards self assessment								
Inpatient day total				305 538	450 525		760 774	
Day patient total				9 170	13 576		22 591	
Inpatient separations				49 558	72 498		122 275	
Inpatient discharges-total				44 323	64 931		109 464	
Inpatient deaths -total				2 742	3 610		6 400	
Inpatient transfers out - total				2 791	3 957		6 711	
Inpatient Bed Utilisation Rate (Regional Hospitals)								
Inpatient day total				305 538	450 525		760 774	
Day patient total				9 170	13 576		22 591	
Usable (inpatient) beds				6 656	6 680		6 629	
Expenditure per patient day equivalent (PDE) (Regional Hospitals)								
Expenditure total				1 304 153 824	20 71 282 211		365 858 761	
Patient day equivalent				448 192	681 915		1 153 983	
OPD headcount not referred new				36 903	60 206		100 346	
OPD headcount referred new				46 268	73 118		124 284	
OPD headcount follow-up				275 990	459 099		784 289	
Emergency headcount total				48 040	80 994		136 530	
Complaint resolution within 25 working days rate (Regional Hospitals)								
Complaint resolved within 25 working days				275	410		635	
Complaint resolved				428	517		771	
Specialised Hospital								
Hospitals that achieved a performance of 75% or more on National Core Standards self assessment								
Hospital achieved 75% and more on National Core Standards self assessment					9		-	
Hospitals conducted National Core Standards self assessment					10		-	
Complaint resolution within 25 working days rate								
Complaint resolved within 25 working days				10	23		94	
Complaint resolved				10	22		94	
Programme 5: Central Hospital Services (CHRS)								
Provincial Tertiary Hospitals Services								
Hospital achieved 75% and more on National Core Standards (NCS) self assessment rate (Tertiary Hospitals)								
Hospital achieved 75% and more on National Core Standards self assessment					1		1	
Hospitals conducted National Core Standards self assessment					1		1	
Average Length of Stay (Tertiary Hospitals)								
Inpatient day total				71 924	110 919		184 196	
Day patient total				1 327	2 090		5 418	
Inpatient separations				8 836	13 854		23 312	
Inpatient discharges-total				6 456	10 117		17 116	
Inpatient deaths -total				566	848		1 404	
Inpatient transfers out - total				1 924	2 888		4 782	
Inpatient Bed Utilisation Rate (Tertiary Hospitals)								
Inpatient day total				71 924	110 919		184 196	
Day patient total				1 327	2 090		5 418	
Usable (inpatient) beds				1 729	1 742		1 742	
Expenditure per patient day equivalent (PDE) (Tertiary Hospitals)								
Expenditure total				3 718 79 598	5 79 04 626		10 133 74 320	
Patient day equivalent				99 017	150 548		252 564	
OPD headcount not referred new				5 751	8 258		13 873	
OPD headcount referred new				12 351	18 125		31 419	
OPD headcount follow-up				51 865	74 359		127 059	
Emergency headcount total				9 526	15 004		24 626	

KZN QUARTERLY PERFORMANCE REPORT Q2

Programme / Subprogramme / Performance Measures	Audited Outcome for 2017/18 as per Annual Report	Target for 2018/19 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Preliminary output	Comments for the 1st Quarter
Complaint resolution within 25 working days rate (Tertiary Hospitals) Complaint resolved within 25 working days Complaint resolved				17 17	39 42		45 48	
Provincial Central Hospitals Services Hospital achieved 75% and more on National Core Standards (NCS) self assessment rate (Central Hospitals) Hospitals achieved 75% and more on National Core Standards self assessment Hospitals conducted National Core Standards self assessment								
Average Length of Stay (Central Hospitals) Inpatient day total Day patient total Inpatient separations Inpatient discharges-total Inpatient deaths-total Inpatient transfers out - total				34 755 204 3 885 2 641 131 1 113	51 869 366 5 854 4 088 226 1 540		87 427 641 9 990 6 883 383 2 724	
Inpatient Bed Utilisation Rate (Central Hospitals) Inpatient day total Day patient total Usable (inpatient) beds				34 758 254 846	51 869 386 846		87 427 641 846	
Expenditure per patient day equivalent (PDE) (Central Hospitals) Expenditure total Patient day equivalent OPD headcount not referred new OPD headcount referred new OPD headcount follow-up Emergency Headcount total				419403 019 45 388 5 2 899 27 823 783	592493 197 67 750 6 4 396 41 551 1 111		1094490 097 114 798 14 7 629 71 673 1 836	
Complaint resolution within 25 working days rate (Central Hospitals) Complaint resolved within 25 working days Complaint resolved				20 20	32 32		56 56	