

QPR for FV 2020-21 for Provincial Institution of Health of location KwaZulu Natal as of (Truesday, February 9, 2021 1:36:01 PM)

								-		Quarter - 3			Annual Performance	
Programme		Sub Programme	Indicator	Indicator Type	MTSF Priority	Cluster	Au lited out, ome IV 2019 20	Target Q3	Actual Output Q3	Reason for Deviation Q3	Corrective Action Q3	Annual Target	Reason for Deviation	Corrective Action
Programme 1: Artinina	k/at/tien	Arlimbab (nation)	Audit opinion of Provincial DoH	Non-Standardized	Priority 3: Education, Skills And Health						E	unqualified		60,000
			Contingent liability of medico-legal cases	Non-Standardized	Priority 3: Education, Skills And Health	Development cluster					-	R22 Bn	-	
4			Medical Officers per 100 000 population	Non-Standardized	Priority 3: Education, Skills And Health	Develo ment cluster						27.4		
						Develo ment cluster								
			Number of CHW's contracted into the Health System	Non-Standardized	Priority 3: Education, Skills And Health	o-velo-ment cluster						10100		
			Number of new ambulances disposed	Non-Standardized	Priority 1: Calculation, skills And Health	The Social Protection, Community and Human Develorment cluster						49		
1			Number of new ambulances purchased	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human- Dovelopment status						100		
			Number of new vehicles disposed	Non-Standardized	Priority 3: Emzation, Seek And respite	Development cluster						200		
1			Number of new vehicles purchased	Non-Standardized	Priority 3: Education, Skills And Health	Die Sazial Protection, Community and Human				I	†	270	 	
			Percent ambulances that are operational	Non-Standardized	Priority 2: Education, Skills And Health	The Social Protection, Community and Human						70		
			Percent of achievement on Improvement plans on HR	Non-Standardized	Priority 3: Education, Skills And Health	The focus Pyotestisis, Community and Human			+	<u> </u>	+	0		+
			Percent of achievement on improvement plans on	Non-Standardized	Priority 3: Education, Skills And Health	Development United The Social Franchise, Community and Homan						100	-	
1			Leadership and Governance Percent of Hospitals with a stable ICT connectivity	Non-Standardized	Priority & Estacation, SAGS And Neuth	Develo, ment cluster The Social Protection, Community and Human				-		80.60		+
			Percent of initiated/instituted disciplinary cases finalised		Priority 3: Education, Skills And Health	Provelo, ment cluster						00.00		
						Develogment cluster						90		
			Percent of PHC facilities with a stable ICT connectivity	Non-Standardized	Priority 5: Emicalism, Shills And Investig	The Social Protection, Community and Human Develo ment cluster						80		
			Percent of vehicles that are operational	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Develoment cluster						90		
I			Percentage of facilities certified by OHSC	Non-Standardized	Priority 3: Edinastics, Saills And Health	The Social Protestion, Community and (Comun.) Develo, ment cluster						68.7		
			Percentage of Rospitals compliant with Occupational Health and Safety	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						100		
			Percentage of hospitals with functional hospital boards	Non-Standardized	Priority 3: Education, Skills And Health	Christian and Durker The Social Featherney, Community and Horses						100		-
			Percentage of PHC facilities with functional clinic	Non-Standardized	Priority 3: Education, Skills And Health	Develor ment cluster The Social Protection, Community and Human						80		+
			committees Percentage of SMS and CEOs with annual EPMDS	Non-Standardized	Priority 3: Education, Skills And Health	Description Community and Hyman	-					100	-	+
			assessments signed off by due dates Percentage of supplier invoices paid within 30 Days	Non-Standardized		Develorment cluster The Social Protection, Community and Human				-		85	-	+
			Percentage of the population with private medical cover	Non-Standardized	Priority 3: Education, Skills And Health	Develorment cluster The Social Protection, Community and Human						Monitor Trends		-
						Develorment cluster						Monitor Frenas		
			Percentage over and under expenditure	Non-Standardized	Priority 3 (France) (48), 644 (140)	The Social Protection, Community and Human						D.		
			Percentages of Hospitals electronically recording clinical codes for their patient	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Povelo, ment cluster						2.80		
			Professional nurses per 100 000 population	Non-Standardized	Priority 2. Education, 33/25, 4 and Florida.	The Social Protection, Community and Human Develorment cluster						157.5		
			SMS and CEOs with annual EPMD5 Assessments signed off by due dates	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Develorment cluster						100		
			UHC service ladex 5	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						72.0		+
Programme 2: District H	Health Services	Onesia Prevention and Control	Diabetes incidence	Non-Standardized	Priority 1. Facques, salls and Health	The Social Protection, Community and Human				t		2.8	 	_
			Hypertension Incidence	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						28	-	-
			Malaria case fatality rate	Standardized	Priority II. Education, 34/III. And Poults	Develorment cluster The Social Protection, Community and Human				-		0.4	-	+
			Malaria incident per 1000 population at risk	Non-Standardized	Priority 3: Education, Skills And Health	Development cluster The Social Protection, Community and Human						Zero new local infections		
	-	District Hospitals		Standardized		Develor ment cluster						2.0		
		District Hospitals	Hospital		Priority 2. Education, Skills And Health	The Social Protection, Community and Human						2.0		
			Child under 5 years pneumonia case fatality rate - District Hos_ital		Priority 3: Education Sallic And Health	The Social Protection, Community and Human Develorment cluster						1.7		
			Child under 5 years severe acute malnutrition case fatality rate - District Hospitals	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Develorment cluster						6		
			Death in facility under 1 years rate - district hospital	Non-Standardized	Priority E. Education, SASS, And Heath.	The Social Protection, Community and Human Develoment cluster						4.9		
			Death in facility under 5 years rate - district hospital	Non-Standardized	Priority 3: Education, Skills And Health	The SS-out Experience coveraging and frames						4.2		
			Death under 5 years against live birth rate - District	Standardized	Princip J. Education, Mills And Health	The Sould Principles, Community and Halban						1.2		
			Maternal Mortality in facility ratio - District Hospital	Standardized	Priority I. Education, Mails And Health	Develorment cluster The Social Protection, Community and Human						55.2		+
			Neonatal death in facility rate District Hospital	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human			+			9.0		-
			Patient Experience of Care satisfaction rate - District	tandardized	Priority & Education (Date And Small)	Develorment cluster The Social Protection, Community and Human			_			81.8		+
			Hospital Patient Safety Incident (PSI) case closure rate - District	Standardized	Priority 3: Education, Skills And Health	Develor ment cluster The Social Protection, Community and Human			+			93.6		-
			Hospital Percentage of Complaints on Patient care - District	Non-Standardized	Priority	Develo, ment cluster The Social Protection, Community and Human			-		ļ			-
			Haranals		_ GWINGEN NEW PRESS	Develo ment cluster						21.8		
			Percentage of Complaints on Staff Attributes - District Hospitals	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Develorment cluster						15.9		
	1		Percentage of Complaints on waiting times - District Hospitals	Non-Standardized	Priority J. THICEHOL. SHIPLE and Health	The Social Protection, Community and Human Develorment cluster						22.6		
			Still birth in facility - District Hospitals	Non-Standardized	Priority 1: Education 14 In And Health	The Social Protection, Community and Human Development cluster						17.6		
	Ī	HIV, AIDS, STI & TB Control	Adult Viral load suppressed rate	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						90		
			Ali DS-TB client death rate	Standardized	Priority I: (elecation, shifts And Health	The Social Protection, Community and Human						7		
			All DS-TB client treatment success rate	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						81		_
			ART adult death rate	Non-Standardized	Priority & Education, Sales And Haatte	Develor ment cluster The Social Protection, Community and Human						1.1		+
	1		ART child death rate	Non-Standardized		Develorment cluster The Social Protection, Community and Human						1,2		+
			ART child viral load suppressed rate	Standardized		The Social Protection, Community and Human			_	-		00		
						Develo ment cluster						30		
			ART death rate	Standardized		The Social Protection, Community and Human Develorment cluster						1.15		
			HIV incidence	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Develoment cluster						0.52		
			HIV positive 15 - 24 years (excl ANC) rate	Standardized	Priority & Education, Williams And Househ	The Social Protection, Community and Human Develor ment cluster								
			HIV prevalence among 15 - 24 year old pregnant women	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human								1
			HIV prevalence among 15-24 years olds (excl ANC)	Standardized	Priority J. Educatur. Saill, 452 Hyalth	Development course. The Social Protection, Entersoring and Homes.			+			Baseline to be established		+
					Priority I. Education, Stills And Health	Development cluster The Social Profescion, Colombianty and Human.						400		+
			TB incidence	Non-Standardized	PHOTOGRAPH CONCRETE SAME AND METERS	A PRE-SUSCIAL P. THIS P. CATEGORIES AND A STREET AND A ST						400		

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		TB Rifampicin resistant/MDR/pre-XDR treatment success	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human			1	I		71		T
n.	Maternal, Neonatal, Child & Women's Health &	child under 5 years diarrhoea case fatality rate	Standardized	Priority & Education, Skills and Health	The Social Protection, Community and Human					-	2		
1	Nutrition	Child under 5 years dlarrhoea Incidence	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						-		
1		Child under 5 years pneumonia case fatality rate	Standardized		pevelopment cluster						,		
- 1				Priority 3: Education, Skills And Health	The Social Protection, Community and Human Do lo mont cluster						2.2		
- 1		Child under 5 years pneumonia incident	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Develorment cluster						38		
		Child under 5 years Severe acute malnutrition case fatality	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						6		
		Child under 5 years severe acute malnutrition incident	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						1.7		
		Death in facility under 5 years - total	Non-Standardized	Priority 3: Education, Skills And Health	Develorment cluster The Social Protection, Community and Human						4.2		
1		Death under 1 year rate (annualized) - total	Non-Standardized		Develo ment cluster								
1				Priority II Education, Saids And Health	The Social Protection, Community and Human Development cluster	ļ					5		
		Death under 5 years against live birth rate	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human De la lorment cluster						1.8		
1		Early Neonatal death rate	Non-Standardized	Priority & Education, Skills And Health	The Social Protection, Community and Human						8.5		
		Infant Mortality Rate	Non-Standardized	Priority 3: Education, Skills And Health							29		
		Infant PCR test positive around 10 weeks rate	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						0.5		-
1		Live Birth under 2 500 g in facility rate	Standardized		Develorment cluster						0.5		
				Priority 3: Education, (Aid) And (Newth	The Social Protection, Community and Human Develorment cluster						11.5		
		Maternal Mortality in facility Ratio - Total	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Develorment cluster						85		
		Neonatal death in facility rate	Standardized	Priority & Effectives, Shifts Afril creetty	The Social Protection, Community and Human						11.3		
		Still birth in Facility rate	Non-Standardized	Priority 3: Education, Skills And Health	Develorment cluster The Social Protection, Community and Human						21		_
		Under 5 mortality rate	Non-Standardized	Priority & Education, Saille And Health	Develor ment cluster The Social Protection, Community and Human						40		
	timary Haulth Care	Ideal clinic status obtained rate	Standardized	The state of the s	Develorment cluster The Social Protection, Community and Human						70		
12	I many page 1. Care			Priority 3: Education, Skills And Health	Development cluster						100		
		Patient Experience of Care satisfaction rate - PHC	Standardized	Priority 3. Louissen, Skills And Health	The Social Protection, Community and Human Development cluster						68.7		
		Patient Safety Incident (PSI) case closure rate - PHC facility	Standardized	Priority): (Hocation, S), illy And Health	The Social Protection, Community and Human						87.3		
		Percentage of complaints on patient care - PHC	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						16.3		
1		Percentage of complaints on staff attitude - PHC	Non-Standardized	Priority of the allow Shell, And Health	Develorment cluster The Social Protection, Community and Human						20.7		
				UOFHVV_SENVERS VALUE	Develor ment cluster								
		Percentage of complaints on Waiting times - PHC	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Develorment cluster						37.5		
edical Services	mergency Medical Services	EMS P1 rural response under 60 minutes rate	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human								
	Series Marces				Develonment cluster								
		EMS P1 urban response under 30 minutes rate	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Develorment cluster								
pital Services Ci	Thronic/ Sub-Acute Hospitals	Patient Experience of Care satisfaction rate	Standardized	Priority is transport, skills and mails	The Social Protection, Community and Human						79.5		
1		Patient Safety Incident (PSI) case closure rate	Standardized	Priority 3: Education, Skills And Health	Develor ment cluster The Social Protection, Community and Human						96.5		
Re	legional Hospitals	Child under 5 year Severe Acute Malnutrition case fatality	Non-Standardized	Priority 3 4 market 12% to 8 hearth	Deveto ment cluster The Social Protection, Community and Human						7		
		rate Child under 5 years diarrhoea case fatality rate		1.00 500000 0000000000000000000000000000	Develo ment cluster						<u> </u>		
			Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster						2.1		
		Child under 5 years pneumonia case fatality rate	Standardized	Priority of Education, Williams Health	The Social Protection, Community and Human Develorment cluster						2.1		
- 1		Death in facility under 5 years	Non-Standardized	Priority of Education, 1976, And Hearth	The Social Protection, Community and Human						4.8		
		Death in facility under one year	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						5.2		
		Death under 5 years against live birth rate	Standardized	Priority & Kitheral (es., Shalls Alice Hinable)	Development cluster The Social Protection, Community and Human						1.9		
		Maternal Mortality in facility ratio			Develo ment cluster								
			Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						101.5		
		Neonatal death in facility rate	Standardized	Priority & Laterallian, Shrist And Health	The Social Protection, Community and Human Development cluster						16.1		
		Patient Experience of Care Satisfaction rate	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						81.8		_
		Patient Safety Incident (PSI) case closure rate	Standardized	Priority 1: Education, Shills And Health	The Social Protection, Community and Human						87.3		
		still birth in facility rate	Non-Standardized	Priority 3: Education, Skills And Health	Develo ment cluster The Social Protection Community and Human								
-	and the set White could be				The Social Protection, Community and Human						26.9		
Sp	pecialised TB Hospitals	Patient Experience of Care satisfaction rate	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster						93.7		
		Patient Safety Incident (PSI) case closure rate	Standardized	Priority (California), SAIII And Health	The Social Protection, Community and Human Develoument cluster						89.8		
5 pe	persolved Psychotric rengitals	Patient Experience of Care satisfaction rate	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						88.7		_
		Patient Safely incident (PSI) case closure rate	Standardized	Priority Inducation, 14-04, Auditorate	Develor ment cluster The Social Protection, Community and Human						95.5		-
al Services Co	RETYTAL THIRD PHONIO	Child under 5 years preumonia case fatality rate	Standardized	Princip St Education Stills And Hostel	Develo, ment cluster The Social Protection, Community and Human								
	The state of the s				Develorment cluster						14.6		
		Child under 5 years Severe Acute Malnutrition case fatality rate	Non-Standardized	Priority 5. Telephone, Skelly April Heed h	The Social Protection, Community and Human						20		
		Death in facility under 1 year	Standardized	Priority - Foundamental in And Heath	The Social Protection, Community and Human						8.9		
		Death in facility under 5 years rate	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						5.4		
		Death under 5 years against live birth rate	Standardized	Priority 1: Literature, Skills And Swatth	The Social Protection, Community and Human						42.2		-
		Maternal Mortality in facility ratio		Priority 3: Education, Skills And Health	Develo ment cluster						1216		
					The Good Fronzollin, Collinium (Cash Homas Smolbschieb), Weller								
		Neonatal death in facility rate - Central Hospital	Standardized	Priority E. Linuxum, Tallic And Havith	Development cluster						136		
		Patient Experience of Care satisfaction rate	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human						90.9		
		Patlent Safety Incident (PSI) case closure rate	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Houses						100		
		still birth in facility rate	Standardized	Priority I Faculture 14 to 2nd heats	Develoment cluster The Social Protection, Community and Human						28.3		
	=tjary Hospitals	Child under 5 years pneumonia case fatality rate	Standardized		Deselombulifabitet								
					The Social Protection, Community and Human Develorment cluster						0.6		
		Child under 5 years Severe Acute Mainutrition case fatality rate	Non-Standardized	Priority 3: Education, Skills And Health	The Economic Sectors, Employment and Infrastructure Develorment cluster						4		
		Death in facility under 5 years rate	Non-Standardized	Priority 3: Education, Skills And Health	The Economic Sectors, Employment and						3.7		
		Death in the facility under 1 year	Non-Standardized	Priority 3: Education, Skills And Health	The Economic Sectors, Employment and						3.7	-	- 5
				Priority 11 Emigratus, think shid begins	Infraction Designation Cluster The Social Protection, Community and Human						7.6		
					Develo ment cluster						2.6		
			Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Develorment cluster						1.7		
		Maternal Mortality in facility ratio	Standardized	Priority of Astaratana, Salita Read Hyatte	The Social Protection, Community and Human						334.9		
		Neonatal death in facility rate	Standardized	Priority 3: Education, Skills And Health	Develorment cluster The Social Protection, Community and Human						22.6		
		Patient Experience of Care satisfaction rate	Standardized	Priority II Feuration, MIN And Mentil	Develorment cluster The Social Protection, Community and Human		V				74.8		
					Develo ment cluster								
		Patient Safety Incident (PSI) case closure rate	Standardized	Priority at Education, Stills And recently	The Social Protection, Community and Human ment cluster						73.2		

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1	Ti i	1	still birth in facility rate	Non-Standardized	Priority 3: Education, Skills And Health	The Economic Sectors, Employment and					28.9	
	Programme 6: Health Sciences and Training	Health, Science and Training	Number of Bursaries awarded to first year medicine	Non-Standardized	Priority 3: Education, Stylin And Health	Infrastructure Develogment cluster The Social Protection, Community and Human					72	
			Number of Bursaries awarded to first year other health	Non-Standardized	Priority 3: Education, Skills And Health	Development cluster The Social Protection, Community and Human					30	-
			professions students Nümber of Bursaries awarded to first year other health	Non-Standardized	Priority 1: Education, Stelly And Health	Development cluster The Social Protection, Community and Human					33	
			erofessions students Number of Emergency Medicine Specialists in training	Non-Standardized	Priority 3: Education, Skills And Health	Development Cluster The Social Protection, Community and Human					0	
1			Number of employees trained through the Regional	Non-Standardized	Priority 1 (2) allow Saids and Saurin	Development status Yille Social Fortestion, Community and Human					500	
			Training Centre Number of Internal employees awarded bursaries	Non-Standardized	Priority 3: Education, Skills And Health	Development cluster The Social Protection, Community and Human					100	
						Development clinites					400	
			Number of officials training through EMS college	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Hutsun Development challer					405	
			Percentage of the population within a 5 km radius of a health service	Non-Standardized	Priority 3: Education, 54/5: And Imakin	The Social Frotection, Community and Human Development cluster					Mapping Done	
Quarterly	Programme 1: Administration	Admigistration	Percent ambulances that are operational	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	70		This indicator has been discontinued for the remainder of the current financial year as a similar indicator appears under Programme 3 (EMS).	It will be reviewed for the 2021/22 APP.	70	
			Percent vehicle that are operational	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	90	¥7.86	The Improvement is due to the move to lower lock-down levels which improved the turn-around times of vehicle repairs and maintenance		990	
	Programme 2: District Health Services	Disase, Privatition and Control	Case Fatality Rate for covid-19: 5 - 60 years	Non-Standardized	Priority S. Relocations, Smith And Health	The Social Protection, Community and Human	Monitor Trends	2.8N	No target available to determine		Monitor Trends	
						Development cluster			the deviation, therefore none is provided.			
			Clients accessing rehab services	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	170000	148799	COVID-19 pandemic still negatively affecting clients accessing disability and rehabilitation services. Therefore target was not met.	Programme to continue monitoring situation at operational level.	680000	
			Covid-19 Positivity Rate	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human	Monitor Trends	19.6%	No target available to determine		Monitor Trends	
						Development cluster			the deviation, therefore none is provided.			
			Covid-19 Testing Coverage	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	Monitor Trends	ER HUTINGE	No target available to determine the deviation, therefore none is		Monitor Trends	
			Mental Disorders Screening	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human	35	SCE	rovid		35	
						Development cluster			Health (BMH) screening tool done in September and implemented by all Districts.			
			Mental Health Screening	Non-Standardized	Priority a securities, State Andreadth	The Social Protection, Community and Human Development cluster	0				35	
		District Hospitals	Health Care Associated infections - District Hospitals	Non-Standardized	Priority at the sales and the sales	The Social Protection, Community and Human	37	351	Increase attributed to:	Review of the KZN guidelines to	48	-
						Development cluster			 An improvement in reporting, 2) HAts are generally caused by poor hand hygiene and implementation of prevention bundles and monitoring thereof. 	align to those approved by NDoH this year. Implementation of a multimodal approach using the "Plan it, build it, sell it, check it and live it" process. Strengthening PSI reporting is also planned.		
			Severity assessment code (SAC) 1 incident reported within 24 hours rate - District Hospitals	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	n		Indicator discontinued		67.9	
			Severity assessment code 1 incident reported within 24 hours rate - District Hospital	Stanoa/di/ed	РПОПЦУ 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	68	P4-17	The target was not met. Ugu District only reported 15% of their SAC1 incidents within the required 24 hours due to poor functioning of the clinical governance structures.	Strengthen Clinical governance committees	000	
		HIV, AIDS, STI & TB Control	All DS-TB lost to follow-up	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human	0	10	High rate of unevaluated patients	The implementation of the	0	
						Development disser			fuels lest to follow up rate. Resources are limited and monotonic or to the CDVIII to monthly or to the CDVIII to monthly or to the CDVIII to monthly or to the condition of the	recovery plan has been compromised by the second		
			ART astall emoneth its with civil	Mag.Carilling.	Priority & Edwards - Mills And Headle	The Social Protection, Community and Human Development cluster	20.	PT	High loss to follow up and missed appointments remain some of the street	Districts have started with coordination of Adherence positions of the experiment of the started	80	
			ART adult remain on ART end of period	Standardized	Priore; y timed un. Nim Aid Heath	The Social Protection, Community and Human Development cluster	1587719	1442785	High loss to follow up and missed' appointments remain some of the contributing factors, especially in this quarter since there is high mobility of clients during festive holidays.	Districts have started with	633626	

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ART child remain in care rate	Standardzad	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster		72.4	Decrease in performance against the target, which may be attributed due to the following factors: Transitioning from the aggroup of under 15 years to adult cacade, Loss to follow up and mortality. Low case finding at key entity points and a slow uptake of the Index Test modality and disclosure challenges.	appointment lists at weekly nerve centre meetings. Trace and recall early missed and lost to follow up. Implement the home delivery services. Support districts with high TROA net loss		
ART child under 15 years remain on ART end of period	Standardiged	Priority NEXIZESTAN, Mills and Health	The Social Protection, Community and Human Development cluster	62731	40272)	Decrease in performance against the target, which may be attributed due to the following factors: Transitioning from the agi group of under 15 years to adult cascade, test to follow up and the state of the state o	appointment lists at weekly nerve centre meetings. Trace and recall early missed and to follow up. Implement the home delivery services. Support	58068	
AND THE CONTROL OF AND CONTROL OF THE PROPERTY	ttom (Can Callibre)	viiritti, 8. Fikuraliin. Skilli sõna irapõli.	The United Pilotectum, Palifornian and Indicate Development (Humby)	IAASHIS	146 ACEs	High loss to follow up and missed appointments remain some of the	are working on piloting Differentiated Models of Care	701694	
ART (Serry remains of ART and of points). NAs	Non- tandardized	Trivity & Edizzania, Salts And Health	The Mood Protection, Committy in Engineer Description of white-	(44031)		military propolitions		1701694	
erit and and miles	reproductive from	Priority & Education (New York Section 19	The Brasil Francisco, Commonly and Horse Descriptions on the	Trion		refuller theretained		\$1.000 KI	
HTV test done - sum	n — stolfpræn	renty francisco; phila had heath	Controllymore delice: The Read Cremedour, Community and Opinior Delch-billionist (6,484)	(2±149)	933/550	for tapes with metaller in stational and including majors larger for several processing of several processing and includes affecting and includes affecting left the heriting majoration.	terrans during the years, inc.	1000	
		beeds 8 Journal of the Art (twelf)	The Initial Evolution, Corresponds (lift Homes December 2006), Lie 224	20	ALL (F)	Late, of fragress (1945 ST) programs Angless and the ST programs Angless and A	Emilitate the fluthening of his Anneuing and part the on planner state of the control in mireculars of the 11 habities of the control of the 11 habities of the control of the 11 habities	28:	
Med Hersen	nei-Oandelifert	Vindy 2 Officers, AVM And Alasth	The Schill Minterton, College on 1997 beauty. December 4th closes	(II-		and the state of t		16	
Extra code, don 18 a jumpiantes	No tishdarkised 1	Hilly, 8. Islication with star regists.	the Secular Helicitus Chemium & estimatus Presidentest Chemius	SC(2000)	5764304	Implementation of integrated Covers of the Programme of the Covers	Confirmation of Experimental Section (Confirmation Confirmation	200000esi	

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Mark	100	The second secon									
Property		TB XDR freatment start rate	Standardized	Priority 3: Education, Skills And Health		94	D.	private laboratory data is not included which mimics the number of XDR cases diagnosed,	available.Data will be reported	96	
Property of the control of the con	Maternal, Neonatal, Child & Women's Health &	ANC clients initiated on ART rate	Not Applicable	Priority 1. Education, 14th And Huarth		98	113.7		Promote same day initiation	98	
Management Man	Nutrition				Development cluster			they tested positive hence the numerator is higher than the denominator, There is a positive			
Manual Control Control		Antonatal Act visit before 30 weeks rate	Standardised	Delacit	The Social Beataglian County of the and House	75		Tours is seen all the district has		75.0	
Comparation		Anticided 23 Voic District 20 Weeks Falle	Standardized	PHOPAS ALLEGATION, SAIDS GART HELES.		15	Ph. F.	shown an increase in early ANC booking during this period. This continuous improvement can be attributed to community and infacility pregnancy testing. Implementation of the recovery plan also helped in integration of services. Antenatal care services	facility pregnancy testing. Continue to Promote early ANC booking by conducting dialogues through media. Continue with integration of services as stipulated on the		
Manual Control Manu		Antenatal first visit before 20 weeks first visit rate	Standardized	Priority Is Education, 1808 And research		0	-	Indicator discontinued		75	
Company of the comp		Cervical cancer screening	Non-Standardized			0		Indicator discontinued		85	
Part				TEA	Development cluster	To be determined	54.1			To be determined	
Product Prod					Development cluster	to be determined		as the target is still be be determined.		To be betermined	
Description of the control of the co		Couple year protection fate	Standardized	Priority 3: Education, Skills And Health		60	56.3	Shark to undersignable to SYARs on artifacting the state of a more before the surject. The ming be the to good marketing of commonly, present a complique and mother placed to	promotion of contraceptives and community awareness. Health care workers should focus on ongoing myths related to the use of contraceptives especially long Acting Reversible Contraceptives (LARC) and include counselling	60	
Section of the sectio		Delivery 10-19 years in facility rate	Standardized	Priority 1. Touriston, Stills Avid Hearth	The Social Protection, Community and Human Development cluster	16.6	15. F		Sexual and Reproductive health programmes need to continue	16.6	
Considerant Assistance of Chapter Continues of Chap								during this period. This can be associated with previous awareness campaigns promoting	focusing on prevention of pregnancy in adolescent girls especially in the rural areas and		
Ordingment dates Ordingment dates Ording Education, 20th, 3x4 dates Ording Education, 20th, 3x4 dates Ording Education, 20th, 3x4 dates Ording Ordingment dates Ordi		Immunisation under 1 year coverage	Standardized	Priority 3: Education, Skills And Health		88	90.5	campaigns that has been		88	
Whether personnel and processing and		Infant exclusively breastfed at BTap-IPV-Hib	Non-Standardized	Priority 3: Education, Skills And Health		0		Indicator discontinued		63	
Models 2nd direc inversiges Stable-dised Westly 2 Education, Salk And Housels Overlagement duste Westly 2 Education, Salk And Housels Overlagement duste Authorized And And Housels Authorized Salk And Housels And Hous		Infant exclusively breastfed at DTaP-IPV-Hib HBV 3rd dose	e Non-Standardized	Priority 3: Education, Skills And Health	The SAGAL Politecture, Community and Human	61	58.3	Target not met. The performance	Training of Ward Based Outreach	63	
Development cluster Development cluster					Downing meet Cluster			remains stagnant, displaying poor continuation with exclusive	Teams commenced in Q3.		
multiple levels of care e.g. vaccine stock-outs, immunisation consuring at multiple levels of care e.g. vaccine stock-outs, immunisation on confirmed allay, shortage of staff, failure of staff to check the Road To Health Book (RTHB). Mother postnatal visit within 6 days rate Standardized Priority 3: Education, Skills And Health Development cluster The Social Protection, Community and Human Development Cluster The Social Protection Science Science Science Science Science Science Science Science Science	2	Measles 2nd dose coverage	Standardized	Priority 3: Education, Skills And Health		90	ri a			93	-
Development cluster above the target. This may be attributed to the easing of lock-								immunisation occurring at multiple levels of care e.g. vaccine stock-outs, immunisation not offered daily, shortage of staff, failure of staff to check the Road	immunistion. Ensure that RTHB		
		Mother postnatal visit within 6 days rate	Standardized	Priority 3: Education, Skills And Health		77	77.5	above the target. This may be attributed to the easing of lock-	maintaining maternity services	77	

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## And Provided Foundation Provided Founda		14												
## Part of the Company of the Compan		1	Vitamin A dose 12-59 months coverage	Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human		72	66.8			72		
Part						Development duster				Immunisation (EPI) catch up drive	be implemented by all Districts in			
Part										in Q3. Closure of Early Childhood	Q4. It is anticipated that there			
Part														
March Marc														
March Marc														
March Marc		Politicary Health Care	Number of health care associated infections	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human		0		Indicator discontinued		A		
Part		=								The south of the s				
Part Continue Co			Number of health care associated infections - PHC	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human		2	0	No HAI's reported. The infections		В		
Part										that can be expected in PHC are				
### AND PROPERTY OF THE PROPER										Surgical Site Infection (SSI).				
### AND PROPERTY OF THE PROPER		1												
### AND PROPERTY OF THE PROPER														
Part			Number of Ward Based Outreach Teams (cumulative)	Non-Standardized	Priority (CENCERTINE, 1869-And results	The Social Protection, Community and Human		210	128			217		
Part										outreach teams to cater for COVID				
Part										19 screening.				
Part		1	Severity assessment code (SAC) 1 incident reported within	Standardized	Priority 3: Education, Skills And Health			0		Indicator discontinued		57.9		
Part														
Property in the content of the con		1		Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human		57.9	Þ			57.9		
Part										Districts did not report. Amajuba,				
March Marc										Harry Gwala, Umkhanyakude and Umpinyathi Districts did not have				
Management of the company of the c														
Management of the company of the c				1										
Management of the company of the c	gramme 3: Emergency Medical Services	Emergency Medical Services	Average number of daily operational ambulances	Non-Standardized	Priority 3: Education Skills and Montain	The Social Protection Community and Human		200	183	EMS has apparionedb-II	EMS is making owns -# 4-	210	1	
Proposition of the content of the	garay manada are state			Standardized	S. Codenon, Skills Milu nealth				,	with staff being affected by COVID-	minimise the spread of COVID-19	210		
Property of the Company of the Com										19, particularly during the second	among staff members. All			1
Manual Part										multiple staff members on leave	processions are in piddle.			
Property of the content of the con														
Process of the proc										atthus and tower operational				
Process of the proc														
Content of Content Content of	ramme 4: Provincial Hospital Services	Chronic/judi Acase Hospitals	Average length of stay	Non-Standardized	Priority 3: Education, Skills And Health			14.8	1519.3			45		
Teachers are FEED And Standard and Principle And Standard Principle And Sta						Development cluster				Which is a long stay facility. Clairwood Hospital was				
Medical Conference of Company of Conference of Company of Conference of Company of Compa											and the transfer			1
Medical Conference of Company of Conference of Company of Conference of Company of Compa										19.				
Particular and an extension and control productions of the first immediate control production of the first immediate control productions of the first imme			Expenditure per PDE	Non-Standardized	Priority 71 Education, 16 (16 And 1662)11.	The Social Protection, Community and Human Development cluster		195.5	2044.63			3195.7		
Personage of completion and other personal control of completion and other per						bevelopment cluster				while it is a long stay facility.				
Personage of completion and other personal control of completion and other per														
Personage of completion and other personal control of completion and other per														
Personage of completion to spelling the spelling of completing to approximate on soft designation to spelling the spelling of completing to approximate on soft designation to spelling the spelling of completing to approximate on soft designation to spelling of completing to approximate on soft designation to spelling the spelling of completing to approximate on soft designation to spelling the spelling of completing to approximate on soft designation to spelling the spelling of completing to approximate on soft designation to spelling the spelling to approximate on soft designation to spelling the spelling to approximate on soft designation to spelling the spelling to approximate on soft designation to spelling the spelling to approximate on soft designation to spelling the spelling to approximate on soft designation to spelling the spelling to approximate on soft designation to spelling the spelling to approximate on soft designation to spelling the spelling the spelling to approximate on spelling the spelling the spelling to approximate on spelling the			Health Care Associated Intections	Non-Standardized	Priority 3: Education, Skills And Health		ľ		c)	Poor reporting via Patient Safety Incident (PSI) system.	Strengthen Surveillance and use of the PSI tool.	7		
Precutage of completion on participate Precutage of completion on participate on participate of participa														
Presenting of completes on parties care Non-Standard and and to CASE Presenting of completes on parties care Non-Standard and and to CASE The Standard And and the CASE The Standard And And And And And And And And And An			Inpatient bed utilization rate	Non-Standardized	Priority 1. I d. a state 11.05 And pasts	The Social Protection, Community and Human		2	(X)	Data is only for Hillcrest Hospital	Review service package and	51.9		
Premitted of descriptions in patient one Final Standard Good Final Sta					The			-		which is a long stay facility.	facilitate the re-classification of			
Processing of completes on parties can writery and septiment can write						1					Clairwood Hospital.			
Precedenge of compliants on solid attribute. Precedenge of complian										19.				
Precedenge of compliants on solid attribute. Precedenge of complian			l.			1								
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Faccatage of complaints on staff although. And Supervised Sections (Section Section S			Percentage of complaints on patient care	Non-Standardized	Priority 3: Education, Skills And Health			1.4	E	There was wrong categorisation of patients. There is also	The district had a road show to provide guidance on how to	21.4		
Development dution Processing of Compilation on waiting times Rev-Standardified Processing in the waiting times Rev-Standardified Processing of Compilation on waiting times Rev-Standardified Processing in the waiting and thousand Conference on the waiting times Reversing in			Percentage of complaints on patient care	Non-Standardized	Priority 3: Education, Skills And Health			11.4	£	of patients. There is also overcrowding in the screening	provide guidance on how to categorise complaints, among	21.4		
Development dutier Percentage of complaints as waking times Non-Standardised Percentage of Complaints as waking times Non-Standardised Promy # Education, Usin And House Standardised Promy # Education, Stall And House Stall And House Standardised Promy # Education, Stall And House Stall And House Standardised Promy # Education, Stall And House Stall And House Standardised Promy # Education, Stall And House Stall And House Standardised Promy # Education, Stall And House Stall And House Standardised Promy # Education, Stall And House Stall And House Standardised Promy # Education, Stall And House Standardised Promy #			Percentage of complaints on patient care	Non-Standardized	Priority 3: Education, Skills And Health			11.4	8	of patients. There is also overcrowding in the screening area which makes patients	provide guidance on how to categorise complaints, among	21.4		
Percentage of complaints on waiting times Not-Standardford Percen						Development cluster			5	of patients. There is also overcrowding in the screening area which makes patients unhappy.	provide guidance on how to categorise complaints, among other things.			
Precentage of Complaints on washing times Non-Standardieved Precentage of Complaints on washing times Non-Standardieved Proving it if our pass a fact in the fact of the fact in the fact of the fact in the fact of the fact in the f						Development cluster The Social Protection, Community and Human			F YE	of patients. There is also overcrowding in the screening area which makes patients unhappy. At Clairwood Hospital staff members did not provide quality	provide guidance on how to categorise complaints, among other things. Monitor the progress in the 4th Quarter after the Roadshow is			
Percentage of Complaints on waiting Times Non-Standardieved Priority is discussion, file And Health Priority is discussion,		2				Development cluster The Social Protection, Community and Human			75	of patients. There is also overcrowding in the screening area which makes patients unhappy. At Clairwood Hospital staff members did not provide quality service with consideration for	provide guidance on how to categorise complaints, among other things. Monitor the progress in the 4th Quarter after the Roadshow is conducted on Customer value.			-
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Development cluster Development cluster		2	Percentage of complaints on staff attitudes	Non-Standardized	Priority at the atum, sality was treated	Development cluster The Social Protection, Community and Human Development cluster			6 70	of patients. There is also overcrowding in the screening area which makes patients unhappy. At Clairwood Hospital staff members did not provide quality service with consideration for patient dignity.	provide guidance on how to categorise complaints, among other things. Monitor the progress in the 4th Quarter after the Roadshow is conducted on Customer value. Staff members were counselled on patient care.	21.4		
Severify assessment Code [SAC] Incident reported within 24 Non-Standardized Priority 3: Education, Skills And Health Development cluster Severify assessment Code [SAC] Incident reported within 24 Non-Standardized Priority 3: Education, Skills And Health Development cluster		2	Percentage of complaints on staff attitudes	Non-Standardized	Priority at the atum, sality was treated	Development duster The Social Protection, Community and Human Development cluster The Same Performent Community and Human			5 70	of patients. There is also overcrowding in the screening area which makes patients unhappy. At Clairwood Hospital staff members did not provide quality service with consideration for patient dignity.	provide guidance on how to categorise complaints, among other things. Monitor the progress in the 4th Quarter after the Roadshow is conducted on Customer value. Staff members were counselled on patient care.	21.4		
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		Regional Hospital	Percentage of complaints on staff attitudes Percentage of complaints on waiting times Percentage of Complaints on waiting Times Severity assessment Code (SAC) 1 incident reported within 24 hours rate Severity assessment code 1 incident reported within 24 hours rate Scomplaints on patient care % Complaints on staff attitudes % Complaints on waiting time	Non-Standardized Non-Standardized Non-Standardized Standardized Non-Standardized Non-Standardized Non-Standardized Non-Standardized Non-Standardized	Priority 3: Education, Skills And Health	Development cluster The Social Protection, Community and Human Development cluster		67	52	of patients. There is also overcrowding in the screening area which makes patients unshappy. At Clainwood Hospital staff members did not provide quality service with consideration for patient dignity. Incitator discontinued At Clainwood Hospital there was only 10 octor allocated to ARV and T6 clains resolving in long waiting the patient dignity. No SAC 1 incident reported	provide guidance on how to categorise complaints, among other things. Monitor the progress in the 4th Quarter after the Roadshow is conducted on Customer value. Staff members were counselled on patient care. An additional Doctor was allocated at Clairwood ilospital ARV/TB clinics.	21.4		
		Regional Hospital	Percentage of complaints on staff attitudes Percentage of complaints on waiting times Percentage of Complaints on waiting Times Severity assessment Code (SAC) 1 incident reported within 24 hours rate Severity assessment code 1 incident reported within 24 hours rate Scomplaints on patient care % Complaints on staff attitudes % Complaints on waiting time	Non-Standardized Non-Standardized Non-Standardized Standardized Non-Standardized Non-Standardized Non-Standardized Non-Standardized Non-Standardized	Priority 3: Education, Skills And Health	Development cluster The Social Protection, Community and Human Development cluster		67	52	of patients. There is also overcrowding in the screening area which makes patients unshappy. At Clainwood Hospital staff members did not provide quality service with consideration for patient dignity. Incitator discontinued At Clainwood Hospital there was only 10 octor allocated to ARV and T6 clains resolving in long waiting the patient dignity. No SAC 1 incident reported	provide guidance on how to categorise complaints, among other things. Monitor the progress in the 4th Quarter after the Roadshow is conducted on Customer value. Staff members were counselled on patient care. An additional Doctor was allocated at Clairwood ilospital ARV/TB clinics.	21.4		
		Regional Hospital	Percentage of complaints on staff attitudes Percentage of complaints on waiting times Percentage of Complaints on waiting Times Severity assessment Code (SAC) 1 incident reported within 24 hours rate Severity assessment code 1 incident reported within 24 hours rate Scomplaints on patient care % Complaints on staff attitudes % Complaints on waiting time	Non-Standardized Non-Standardized Non-Standardized Standardized Non-Standardized Non-Standardized Non-Standardized Non-Standardized Non-Standardized	Priority 3: Education, Skills And Health	Development cluster The Social Protection, Community and Human Development cluster		67	52	of patients. There is also overcrowding in the screening area which makes patients unshappy. At Clainwood Hospital staff members did not provide quality service with consideration for patient dignity. Incitator discontinued At Clainwood Hospital there was only 10 octor allocated to ARV and T6 clains resolving in long waiting the patient dignity. No SAC 1 incident reported	provide guidance on how to categorise complaints, among other things. Monitor the progress in the 4th Quarter after the Roadshow is conducted on Customer value. Staff members were counselled on patient care. An additional Doctor was allocated at Clairwood ilospital ARV/TB clinics.	21.4		

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	Expenditure per PDE	Non-Standardized	Pricety action steel, skills And Health	The Social Protection, Community and Human Development cluster	3235.4	4197.74	Additional resources were procured such as oxygen infrastructure and supplies, ventilators, and human resources, as a result of the second COVID-19		3220	
	Health Care Associated Infections	Non-Standardized	Priority is Estocation, Swim and Health	The Social Protection, Community and Human		Table	wave.			
				Development cluster		ener.	The increase is attributed to: 1) Improvements in reporting. 2) Poor adherence to standards and transmission based precartioes including to hand luggiene protocols. 3) Poor implementation and monitoring of the prevention bundles.	IZTN guideline will be reviewed with a view to align to the NDob guidelines, which were approved this year. Follow a multimodal approach for implementation.		
	Health Care associated with infections	Non-Standardized	Priority 8) Education, Skills And Graditi	The Social Protection, Community and Human Development cluster	3		Indicator discontinued		12	
	Inpatient (usable) bed utilisation rates	Non-Standardized	Priority at Charatters, Name April (Guith)	The Social Protection, Community and Human Development cluster	72,4	65.5	As a routine practice elective services are curtailed in	Reinstate elective services.	73.4	
							December, which coincided with the COVID19 second wave.			
	Inpatient bed utilization rate	Non-Standardized	Priorny J. Education, Skills And Heath	The Social Protection, Community and Human Development cluster	0				73.4	
	Percentage of Complaints on patient care	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	42.1	25.7	Possibly as a result of in-service training to all clinicians on professionalism and Batho Pele		42.1	
	Percentage of Complaints on staff Attitudes	No. Vieta dest	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	15.2		The changes introduced in health facilities make patients unhappy and even though explanations are	should inform clients of new	15.1	
	Percentage of Complaints on waiting Times	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	11.8	15	As there are changes in the workload and screening processes waiting times increase.	Regular communication with clients and providing them with updates on relevant issues should reduce complaints.	11.8	
	Serverify assessments code 1 incident reported within 24 hours rate	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	76.2	50.0	There is sometimes delays in the reporting of SAC Lincidents resulting in failure to adhere to National Guidelines.		76.2	
	Severity assessment code (SAC) 1 Incident reported within 24 hours rate	Standardized	Priority 2: I (faculture, 14)16. And Health	The Social Protection, Community and Human Development cluster	0				76.2	-
lalised Psychiatric Hospitals	Health Care Associated infections	Non-Standardized	Priorie II Education, SAIII And the Life	The Social Protection, Community and Human Development cluster	7		and then patient to patient, Poor and sometimes difficult implementation of Covid-19	together with district support. Strict implementation of Covid-	28	
	Percentage of Complaints on patient care	Non-Standardized	Prior by E. Chicathin, Skills And Health	The Social Protection, Community and Human Development cluster	0			Communicate and educate new processes to clients so that they are aware of the possible delays during this time.	24.1	
	Percentage of Complaints on staff attitudes	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human	5.2	D	No complaints received		5.2	
	Percentage of Complaints on waiting times			Development cluster The Social Protection, Community and Human Development cluster	4.2		for this cate, o .		4.2	
	Percentage of Completions on warms finen	Non-Standardized	Priorite & Education Nulls And Youth	The Social Protection, Community and Human	8,6	0	No complaints received for this		8.6	
	Severity assessment Code (SAC) 1 incident reported within #1 hours rate	Standardized		Develo ment cluster The Social Protection, Community and Human Development cluster	0		Sitter		64.3	
	Severity assessment code 1 incident reported within 24 hours rate	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	64.3		Non-adherence to guidelines on the reporting of SAC1 incidents	Personnel to be encouraged to comply to the implementation of	64.3	
TB Hospitals	Average length of stay	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	60		100% beds at Richmond Mospital and 14 beds at Doris Goodwin Mospital were repurposed for COVID-19.	National ;	60	
	Expenditure per PDE	Non-Standardized	Priority in advisation, these Zantineans	The Social Protection, Community and Human Development cluster			100% beds at Richmond Hospital and 34 beds at Doi is Goodwin Hospital were repurposed for COVID-19. Don McKenzie and charles James Hospitals were closed due til poor utilization and in fine with hospital rationalization plan.	Redeploy resources in line with the Hospital Rationalisation Plan	6220.7	
Ī	Health Care Associated with infections	Non-Standardized	Priority 3: Calmanian, tach And regatio 1	The Social Protection, Community and Human			Possible poor reporting. Nosomial	Strengthen use of PSI as a	2	
			1	Several and the several and th				reporting tool	4	

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Property of the content of the con			Inpatient (usable) beds utilisation rates	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster		37	14.9	Don McKenzie and Charles Jame Hospitals were closed due to por utilization and in line with hospit		36.9	
Marchael										rationalization plan. 100% beds a Richmond Hospital and 14 beds a Doris Goodwin Hospital were	1		
Manual Personal Per			Inpatient bed utilization rate	Non-Standardized	Principle & Sales and Sales and Course	The Social Dustantian Community and the							
Part					THE THE ASSESSMENT AND SALES OF THE SALES OF			0		Indicator discontinued		36,9	
Part				Non-Standardized		Develorment cluster		11.1	0		1	31.1	
Part			Percentage of Complaints on staff attitudes	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human		17	5000	Only 1 complaint was received fo this level of care and was related		17	
Property of the Property of			Percentage of Complaints on walting times	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human		17.9	10				
March Marc			Severity assessment code (SAC) 1 incident reported within	Standardized	Priority M Education, (2011) And Invalle	The Social Protection, Community and Human		0					
Property of the control of the con				Nan faardeedeed								00.5	
Marie Mari			hours rate	NON-SCANDARDZEG	PROTEST THERETON, SHIP And HEATH			88.9	0.	eThekwini District. There are no patients at Charles James, Don McKenzie only has out-patients. Richmond hospital is no longer functioning as a TB hospital. Thulasizwe & St Margaret's did no	ı,	88.9	
Part	5: Central Hospital Services	Control Hospitals	Average length of stay	Non-Standardized	Priority 8: (speciation, 14-8), 45-0 (soult).	The Social Protection, Community and Human		8.1	0.0	Critical COVID 10 nationts	Post-constant library		
March Marc						Development duster			PC*	requiring longer stays were managed at this level during the	once there is a decline in COVID-		
Part			Expenditure per PDE	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human		9476.9	17780.48		Performance is likely to improve	9455.7	
Part										hence the increase of average length of stay and increased use o PPE and Oxygen supplies also	once there is a decline in COVID- 19 cases.		
Marie Mari						The Social Protection, Community and Human Development cluster		0		Indicator discontinued		3	
March Marc			Health Care Associated Infections - Central Hospitals	Non-Standardized F	Priority 3: Education, Skills And Health			1	2	Whilst there is an increase, there	Strengthen surveillance and	3	
Procure demonstrate specicion Transport de la constitució de la c										from facility to district and then province. Poor adherence to hand hygiene is said to be responsible for 60% of HAI. Other contributing factor include poor environmental hygiene, poor decontamination of equipment, poor engineering	Align all guidelines to new NDoH guidelines Capacitate Managers Improve monitoring and feedback Promote the concept - "IPC is	1	
Mentagener Comparem of policing Coase Manufagener Comparem of Exception of Coase Manufagener Comparem of policing Coase Manufagener Coa			inpatient bed utilization rate	Non-Standardized P	riority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster		64.5	50.9	curtailed in December due to holidays and staff on leave but the province experienced COVID-19 second wave which resulted in a	Reinstate elective services,	65.8	
Personal Composition on plaints care Teaching of Composition on plaints care			Percentage of complaints on patient care	Inn-Standardized Pi	riority 3: Education, Main, And Health			22	16.3	Patients complained about nurses	The responsible professional	21.8	
Development custor The Standard Standa										not dressing a relative's wound well, relatives being transfused without consent and waiting too long to be seen at special clinics	nurse should communicate well with patients until they are satisfied. With regards to in- patient care, there should be regular in-service training for staff to remend them about their		
Percendage of Completes on waiting Times Procedure of Completes on waiting Times Procedure of Completes on waiting Times Procedure of Completes on waiting Times The Scalar Recenture, Community and Homan Procedure of Completes on waiting Times Service vectored code (SAC) Soddest reported wide)s Case with vectored receptors wide code (SAC) Soddest reported wide)s Case with vectored receptors wide code (SAC) Soddest reported wide)s Case with vector of the code (SAC)			rercentage of Complaints on patient care	on-Standardized Pr	riority 5. Felactions, Shim And Health	The Social Protection, Community and Human Development cluster)		Indicator discontinued		22	
Percentage of Complained on signing thros: Non-Standarding of Months and Standarding of Months and Administration Community and Remain Production, Community and Remain Remains Remain Remains Rema		Ì	Printing of Company of Company	on-S* r fordized				20.2	B B	No complaints were received for		20.2	
Severify accurances code [64C] incident reported within Standardized Finding Standardiz										this category.			
Security passessment code 1 incident reported within 24 Incident reported within 14 In					ľ	Development cluster		6.6	C10	effective as only 1 complaint was	queues efficiently and to work	26.6	
Severity assessment code 1 incident reported within 24 Non-Standardized Priority 3: Education, Salits And Morbit Debug Interesting Company and Admans Debug Interesting Code Incident Code Incident Priority Interesting Code Incident Code Incident Code Incident Priority Interesting Code Incident Co			neverny assessment code (SAC) 1 incident reported within S 24 hours rate	andardized Pr						Hatisatus altinolektoolet		20	
Average length of stay Non-Standardized Priority Extraction Priority Priority Extraction Priority Extraction Priority Priority Extraction Priority P			Severity assessment code 1 incident reported within 24	on-Standardized Pri			- 2	0	300	Adherence to National Guidelines		20	
Curtailed in December due to the holdings and staff on leave but the province experienced COVID-19 spector was which resulted in a mamber of hospital beds being repurposed for COVID-19. Non-Standardized Priority to the standardized Priority in the social Protection, Community and Human Development cluster Development Development Cluster Development Cluster Development Develo	Te	ortuny mongotals		on-Standardized Pri	lority it foliations, their And month	he Social Protection, Community and Human	- 7	.8	N.	Normally elective services are		8.4	
Expenditure per PDE Non-Standardized Priority Internal Development cluster										curtailed in December due to holidays and staff on leave but the province experienced COVID-19 second wave which resulted in a number of hospital beds being			
Development cluster 4240					b	verify the edit of	4	312	ftelae	was an increased use of PPE and Oxygen supplies which increased	implementation of cost cutting	1239.50	
		E	Expenditure per PDE No	n-Standardized Pri			0			Indicator discontinued		1240	
Health Care Associated Infections Non-Standardized Priority Linearum Librard Human Development cluster Development cluster		E	leafth Care Associated Infections	n-Standardized Pri	ority II I distance H. Tallin And Health D.	ne Social Protection, Community and Human	0			Indicator discontinued		.6	

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		Health Care Associated Infections - Tertiary Hospital	Non-Standardized	Priority 3: Education, Skills And Healt	h The Social Protection, Community and Human	14	12	There is a need to improve	Caranathanana	1	
					Development cluster			reporting from facility to district and then province,	Strengthen surveillance and use of PSI tools	16	
		Inpatient bed utilization rate	Non-Standardized	Provilly In Education, Males And Health	The Social Protection, Community and Human Development cluster	70.4	68.8	Normally elective services are curtailed in December due to buildays and staff on leave but the province experienced COVID-19 second wave which resulted as in a number of hospital beds being repurposed for COVID-19. Discharge criteria was relaxed as result of the resurgence in COVID 19.	need of higher levels of care. Reinstate elective services.	72.4	
		OPD headcount new cases not referred	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	7207	NIEE:	Referral protocols reinforced.		29477	
		Percentage of complaints on patient care	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	25	29.4	The response of clinicians to patients is a challenge due to their high workload.	Health workers should continuously be reminded of their Batho Pele principles and	25	
		Percentage of complaints on staff attitudes	Non-Standardized	Priority 2: Education, Skills And Health	The Social Protection, Community and Human	19	11.8	King Edward VIII Hospital recorded	professionalism	10	
		Percentage of complaints on waiting times	Non-Standardized	Principly 3: Education Skills and Weekb	Development cluster The Social Protection, Community and Human			no complaints on staff attitude, Ngwelezana and Grey's recorded 3 and 1 respectively.	complaints should be		
					Development cluster	13.8	G+	Sometimes patients wait longer for procedures or clinics at Tertlary hospitals.	The proper categorisation of complaints should be emphasised to the personnel, Capturing of complaints should also be encouraged and	13,8	
		Severity assessment code (SAC) 1 incident reported with 24 hours rate Severity assessment code 1 incident reported within 24		Priority 3: Fiduciation, faith And Insults Priority 3: Fiduciation, faith And Insults	Development cluster	0		Indicator discontinued		84.6	
e 7: Health Care Support Services	Mewills Care also Spipping Services	hours rate Percentages of facilities reporting clean linen stock ours			Development cluster	84.6	83.3	5 of the 6 incidents were reported within 24 hours from King Edward Hospital. Greys and Ngwelezana Hospitals recorded no incidents.	The District QA Managers for KCD and Umgungundlovu to ensure that their hospitals comply to the implementation of National Guidelines.	84.6	
					The Social Protection, Community and Human Development cluster	26	27	new linen at facilities 4. The Incidents of machine	Optimise existing resourcing through overfilms to reduce solited inten back or existed intended in the control of the con	25	
		Percentages of pharmacies with either Grade A. or Grade B Stalus with the South African Pharmacy (SAPC)	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	99	*1	Doris Godwin Hospital is attending to infrastructural deficiencies that	Collate and monitor Improvement Plans. Facilities to submit progress reports to SAPC for review of the	100	
		Tracer Medicine Stock-Out Rate at facilities (hospital,	Non-Standardized	Priority & Education 148 And Health	The Social Protection, Community and Human	5	2	These seems lims trains there ship protections of track of tabilities		5	
		Tracer Medicine Stock-Out Rate at the Provincial	Non-Standardized	FOUND DESIRES, SOME ALL RICHTS	The Social Protection, Community and Human	5	-	Supply Capatrolets			
Health Facilities Management	results, Factories Management	Pharmaceutical Supply Depot (PPSD) Number of Jobs created through EPWP	Non-Standardized		Development cluster The Social Protection, Community and Human			were not able to meet the	Continue liaison v. th NDOH Affordable Medicines		
					Demilion of Pother	1100	1000		Vot applicable as the annual arget has been achieved.	ping)	
			Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	1	3	Project was completed earlier than anticipated	1	15	
		Number of renovation and refurbishment projects completed			The Social Protection, Community and Human Development cluster		1	Project delayed due to Covid-19	roject to be completed in the 11th quarter	14	
		Number of upgrade and addition projects completed	Non-Standardized	Priority 3: Education, Stills And Health	The Social Protection, Community and Human	0	C	Onlayed Cooks 19 juncest Was, Lectured in the third graphs. Office princest suggested for subspicious on the etil seasons term computed median.	7	,	
		Percentage downtime on medical equipment	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protestion, Community and Human Commission (Autor)	35	12	Regular monitoring of repairs.	3	5	
		Percentage downtime on radiology equipment	Non-Standardized	Priority 3: Education, Skills And Health	The Social Protection, Community and Human Development cluster	10		Deviation is due to facility Supply F Chain Mamagement processes and or COVID-19 pandemic that caused delays in obtaining spare parts from suppliers based abroad.	rders are timeously issued for	0	

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ra . eedback	248	Percentage of Preventative Maintenance expenditure Nom-Sta	Privity & Education, SARS, And Houses	The Social Protection, Community and Human Development cluster		40	27.37	3. It is evident that the use of emergemcy delegation makes it easy for institutions to replace equipment compared to scheduled servicing. 2. The delays in the finalisation of 3-year Service Level Agreements (SLAs).	3 year maintenance and service a contracts (SLAs) are being finalised and some are already in place. There is also a Replacement Forgram for critical engineering equipment.	0	
Vineme Cf	Role Of	Quarter 1		Quarter - 2		Quarter		Quarter	4		200
Harting St. 17	Internation	Fordlack Q1	Dated Q1 - Username Q2	Role Q2	Feedback 07	Feedback (1)		Username 04			Audited Annual
			Ninusta Mondin	Department Coordinator	Thir OZ quartitly	Assertable Control	Da wa Qo	Osemini Q	Rate Q4 D	ited Username	Feedback
			Rosinta Historius	National Thersight	thereward, please see						
			Lulama Stherminia Nation	OTF Coordinator	Please receive report and						
			Luisma Sthombela fefigze	OTP Coordinator	Please receive report and						
			Ninesta Maddley	Department Coordinator	The Quarterly Performance						
			Dr Samille Tahanaluta	Accounting Officer	Approval Certificate: Q2-1						
						The Quarter 3 report is	>2/00/2001s				
						Thank you, please address	38/01/2021				
						kindly find attached	28/01/2021				
						Dr Tshabalala, Please	JW01/2021				
dile Tshabalala	Accounting Officer	Approval Certify ate: Q1 - abmitted for your consideration. Thank you.				Approval Certificate: Q3	J8/61/2001				
Sthembela Ndlazi	OTP Coordinator	Thank you lift the tigort. Place +ote the following:	机印度机构设计				-			_	
Moodley	Department Cool		GHURRHAU							_	
1a Moodley	Department Coordinate	the standardised and non-standardised quarterly performance information that is	HENNEMER								
ia Pretorius	National Oversigh	ase find the submission for Quarter 1 of the non financial performance report. There is a some indicators missing, child mainutrition; pneumonia etc also and mortality indicators.e.g.	навинев							_	

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