

Frequency	Programme	Sub Programme	Indicator	Indicator Type	Output	Data Type	MTSF Priority	Provincial Priority	Cluster	Audited outcome FY 2022 - 23	Target Q2	Actual Output Q2	Reason for Deviation Q2	Corrective Action Q2	Annual Target	Aggregate Output	Pre-Audited Annual Performance	Reason for Deviation	Corrective Action	Audited Annual Performance			
Annually	Programme 1: Administration	Administration	Audit opinion of Provincial Debt	Standardized	Not Applicable	Text	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster						Unqualified								
			Contingent liability of medico-legal cases	Non-Standardized	Not Applicable	Text	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster							23.5							
			UHC Service Index	Non-Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								152.5/100 000						
			Professional nurses per 100 000 population	Non-Standardized	Not Applicable	Text	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								27.4/100 000						
	Programme 2: District Health Services	Disease Prevention and Care		Malaria case fatality rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster							0.0						
				Malaria incidence per 1000 population at risk	Non-Standardized	Not Applicable	Text	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								37/1000					
				Covid-19 Case Fatality Rate - Total	Non-Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								1.2					
				Patient Experience of Care satisfaction rate - District Hospitals	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster									81				
		District Hospitals		(Number of) Maternal death in facility - District Hospitals	Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								49					
				HW/TB and Sexually Transmitted Infections (HAST)	Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								3000					
				ART client remain on ART end of month - sum	Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								1622676					
				Maternal Mortality in facility ratio - Total	Standardized	Not Applicable	Text	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								90.5 / 100 000					
		Maternal, Women and Child Health Including Nutrition (MWCN)		Death in facility under 5 years rate - total	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								6.1					
				Death in facility under 1 years rate - total	Non-Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								8.2					
				Child under 5 years diarrhoea case fatality rate - total	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								1.7					
				Child under 5 years Pneumonia case fatality rate - total	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								1.9					
		Primary Health Care		Child under 5 years Severe acute malnutrition case fatality rate - total	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								8					
				Still Birth in facility Rate - total	Non-Standardized	Not Applicable	Text	Priority 2: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								23.2/1000					
				Head Count Status obtained rate	Non-Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								85.4					
				Patient Experience of Care satisfaction rate - PHC	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								88					
	Programme 4: Provincial Hospital Services	Chronic Hospitals		Patient Experience of Care satisfaction rate - Chronic/Sub-acute Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster							80						
				Patient Experience of Care satisfaction rate - Psychiatric Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								90					
		Regional Hospitals		Patient Experience of Care satisfaction rate - Regional Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster							83						
				(Number of) Maternal deaths in facility - Regional Hospital	Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								109					
	TB Hospitals		Patient Experience of Care satisfaction rate - TB Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								93.3						
			Patient Experience of Care satisfaction rate - Central Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								93.7						
	Programme 5: Central Hospital Services	Central Hospitals		(Number of) maternal deaths in facility - Central Hospital	Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster							9						
				Patient Experience of Care satisfaction rate - Tertiary Hospitals	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								85					
	Programme 6: Health Sciences and Training	Health Sciences and Training		(Number of) maternal deaths in facility - Tertiary Hospital	Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster							23						
				Number of bursaries awarded to first year nursing students	Non-Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								120					
	Programme 8: Health Facilities Management	Health Facilities Management		Number of external employees awarded bursaries	Non-Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster							480						
				Percentage of public health facilities refurbished, repaired and maintained	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster								100					
	Quarterly	Programme 1: Administration	Administration	Number of CHWs contracted into the Health System	Non-Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	10350		10 048	Staff reduction is as a result of natural attrition.	The recruitment of CHWs is under way to fill the vacant posts.	10350	10048						
				Percentage of supplier invoices paid within 30 Days	Non-Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster			95	96.3	Improvement in processing of payments is due to distribution of Payment Cycle Report on a monthly basis to all Head Office Finance Managers as well as District Finance Managers with clear instructions to liaise with the Finance Managers to ensure that delays in payment is investigated and to address the cause(s) of late payments thus ensuring that future payments are made within 30 days.		95	0					
				Percentage of hospitals using the E-Health System	Non-Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster			60	48.6	Operationalization is dependent on budget availability for network upgrades/hardware resources for data capturing and user buy in. To date 34 of 42 hospitals are using eHealth. This is due to network connectivity challenges.	Advocate for adequate budget for network upgrades and hardware, provision of additional resources and implementing change management.	67.1	0					
		Programme 2: District Health Services	District Hospitals		Severity assessment code (SAC) 1 incident reported within 24 hours rate - District Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	83.3		81.5	Adherence to the National Guideline for PSI reporting & learning in the health sector of SA by health establishments.		83	0					
					Patient Safety Incident (PSI) case closure rate - District Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster			90	102.5	PSIs that were being investigated during Q2 were closed during Q3. EThekweni District had PSIs that were closed late in Q1 and were carried over to Q2.	Districts to convene PSI management meetings as per schedule and on demand in order to reduce carry overs.	90	0				
					(Number of) Death in facility under 5 years - District Hospital	Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster			369	298	Implementation of Integrated Management of Childhood Illnesses (IMCI) and early referral from PHC level to district hospital had a positive impact in containing the number of deaths in children under 5.		1476	668				
					Child under 5 years diarrhoea case fatality rate - District Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster			1.6	0.64	Maintaining of PHC programmes and oral delivery (ORS) corners and continuous training of health care workers on Emergency Triage Assessment and Treatment.		1.6	0				
					Child under 5 years pneumonia case fatality rate - District Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster			1.4	2.1	Road outreach support systems and limited access to oxygen.	Improve outreach support and increase access to oxygen support and Nasal continuous positive airway pressure (NCPAP) to establish and	1.4	0				
Child under 5 years Severe Acute Malnutrition case fatality rate - District Hospital					Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster			6.5	4.6	Good inpatient management of admitted cases by training medical interns and professional nurses.		6.5	6					
HW/TB and Sexually Transmitted Infections				All DS-TB client lost to follow up rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster			7	8.8	Duplicates, unconfirmed loss to follow, poor tracking and tracing of patients lead to failure to meet the target. EThekweni accounts for 54% (530) support partner) with data clean-up at (previous quarter 46%).	Engage EThekweni District to conduct data analysis to identify facilities with high loss to follow. Engage Arum to support District support partner) with data clean-up at EThekweni. Continue to mentor districts with data clean-up. Monitor implementation of the	7	0					
				TB Rifampicin resistant / Multi drug - Resistant lost to follow up rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster			15.1	13.4	Improvement in implementing patient therapy classes, tracking and tracing of clients for treatment follow up visits.		15	0					
				TB Pre-XDR Loss to Follow-up Rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster			18.2	30	Poor back referral of the patients from DRT centre of excellence to referral facilities.	Re-orientate all DRT sites on referral pathways to and from the centre of excellence. Engage District TB coordinators to	16	0					

ART adult remain in care rate (12 months)	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	75	69.6	<ul style="list-style-type: none"> <li>• Less to follow up (LTF) at 12 months above 30% in Amajuba, Ethelwini, Isembe, uMgungundlovu and uMkhanyakude) remains the main contributing factor</li> <li>• Challenges with the file flow resulting in delays in updating NER.net also contribute to inept TRGs.</li> <li>• There are still challenges with provision of HIV services in men, adolescent and child friendly services.</li> </ul>	<ul style="list-style-type: none"> <li>• Facilitate multi stakeholder coordination of other department and civil society in retention in care</li> <li>• Start by addressing loss to follow up</li> <li>• 265 HCWs reached with men's health workshop to improve capacity to manage men's health facilities.</li> <li>• More than 160 HCW and sub-district managers were capacitated in child and adolescent HIV and TB services.</li> <li>• Facilitate monitoring of improved HAAT services by men and stakeholder coordination of paediatrics/adolescents.</li> <li>• Collaborate with data management</li> </ul>	75	0							
ART child remain in care rate (12 months)	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	75	81.3	<ul style="list-style-type: none"> <li>• Lost to follow up rate has decreased compared to last quarter.</li> </ul>		75	0							
HIV positive 15-24 years (incl ANC) rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	1.8	1.8	No deviation.		1.8	0							
All DR-TB client treatment success rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	85	70.1	<ul style="list-style-type: none"> <li>• Poor linkage to care of patients transferred out especially from hospital</li> <li>• Unaccounted transfer in and out</li> <li>• High loss to follow up (982/1189)</li> <li>• None of the districts meet the 85% target.</li> </ul>	<ul style="list-style-type: none"> <li>• Engage districts to link to care all patients transferred out.</li> <li>• Monitor implementation of the adherence guidelines.</li> </ul>	85	0							
TB Rifampicin Resistant / Multidrug resistant treatment success rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	70	65.7	<ul style="list-style-type: none"> <li>• Deaths remain high in HIV positive connected patients.</li> <li>• High loss to follow is fuelled by incorrect capturing of outcomes at Ethelwini.</li> </ul>	<ul style="list-style-type: none"> <li>• Engage Ethelwini districts and district supporting partners to clean-up data.</li> <li>• Coordinate the training of the outreach teams on community DR-TB management.</li> </ul>	70	0							
TB Pre-XDR treatment success rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	65.9	55	<ul style="list-style-type: none"> <li>• High loss to follow up rate of 30% (6/20) and death rate of 10% (2/20). Ethelwini district accounts for 67%(4/6) loss to follow up</li> </ul>	<ul style="list-style-type: none"> <li>• Engage districts to continue with linking the DR-TB patients to outreach teams</li> <li>• Reinforce regular household visits to all DR-TB patients on community-TB</li> </ul>	65.9	0							
ART Adult Viral load suppressed rate (Below 50) (12 months)	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	95	80.5	<ul style="list-style-type: none"> <li>• Clients have treatment adherence challenges caused by treatment fatigue, substance use and other social factors.</li> </ul>	<ul style="list-style-type: none"> <li>• More than 2 000 Health Care Workers (HCWs) have been trained on revised ART guidelines to improve clinical outcomes.</li> <li>• Facilitate clearing of patients to</li> </ul>	95	0							
ART Child viral load suppressed rate (Below 50) (12 months)	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	70	51.9	<ul style="list-style-type: none"> <li>• The performance for this indicator is still below the target of 70% indicating sub-optimal viral suppression rates of children. Viral load coverage is below 70% amongst all age bands with lower suppression noted amongst the 0-4 years and 5-9 years.</li> <li>• Psychosocial and mental health issues including disclosure and treatment support remain one of the key barriers towards adherence.</li> <li>• Gaps in Paediatric Dolutegravir (pDTG) coverage due to limited stock.</li> </ul>	<ul style="list-style-type: none"> <li>• Paediatric and adolescent capacity building workshops has been concluded across all 11 districts reaching more than 160 stakeholders including education, social development and civil society.</li> <li>• Priority interventions include the following: <ul style="list-style-type: none"> <li>o Providing provincial technical support to all districts on remedial actions plans developed during the workshops conducted.</li> <li>o Identify, engage, or re-engage Children Living with HIV (CLWHV) who are not in care or not virally suppressed.</li> <li>o Escalate pDTG stock availability with NDOH in order to fast track</li> </ul> </li> </ul>	70	0							
Maternal, Women and Child Health including Nutrition																			
Couple year protection rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	83	64.8	<ul style="list-style-type: none"> <li>• Integration of contraceptive services to other programmes.</li> <li>• Good marketing of Long Acting Reversible Contraceptives (LARCs) in the community.</li> </ul>		83	0							
Delivery 10 to 19 years in facility rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	15.3	18.2	<ul style="list-style-type: none"> <li>• Poor uptake of contraceptives by teenagers as they avoid going to the clinic, and not all facilities are youth friendly.</li> <li>• Rural districts (Iziminyathi, Hlabisa, Zululand and uMkhanyakude) remain with teenage delivery rates above 20%. Early marriages and ukuthwala remains a challenge in these areas.</li> </ul>	<ul style="list-style-type: none"> <li>• Market contraceptives use in a more appealing way for youth, redesign information, education and communication (IEC) materials and utilize social media more instead of leaflets as these are more popular.</li> <li>• Utilise "Peer educators" or the 239 Youth Friendly facilities educate teenagers on sexual reproductive health (SRH).</li> <li>• Continue collaboration with Department of Social Development (DSD) and Department of Education (DDE) to visit schools with high teenage pregnancy and conduct awareness campaigns and iimbizo.</li> </ul>	15.3	0							
Antenatal 1st visit before 20 weeks rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	75	77	<ul style="list-style-type: none"> <li>• House hold community pregnancy testing is closely monitored.</li> <li>• Integration with outreach team initial meeting was conducted to raise awareness on monitoring that all women including teenagers are referred immediately for antenatal care.</li> </ul>		75	0							
Mother postnatal visit within 6 days rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	80	81.3	<ul style="list-style-type: none"> <li>• Post-natal care for women who delivered by caesarean delivery is done in hospitals so that they do not miss their 3-6 day post-delivery visit.</li> </ul>		80	0							

		Infant PCR test positive around 6 months rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	5	0.34	1.09% (217 of 19 899) of breastfeeding women seroconverted during breast feeding and still had a stooly monitored during breast feeding.	5	0							
		HIV Test positive around 18 months rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	1.5	0.36	• 81% of pregnant women start antenatal care already on ART which reduces the rate of transmission to the infants at birth and breastfeeding. • 92.4% of eligible women were initiated on ART.	1.5	0							
		Immunisation under 1 year coverage	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	90	94.7	Implementation of mini campaigns by facilities to reach children who missed their doses.	90	0							
		Meadles 2nd dose coverage	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	95	98.8	Implementation of mini campaigns and defaulter tracing by the facilities to reach children who missed their doses.	95	0							
		Live Birth under 2 500 g in facility rate - Total	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	11.8	12.8	Hypertension, Non Pregnancy Related infections (NPRIs) and other infections including syphilis in pregnancy remain a challenge and contribute to low birth weight often because of preterm delivery. • Women planning to become pregnant are routinely advised to start taking prenatal vitamins and nutritional supplements before conception, chiefly to reduce risk of birth defects. • Early access to prenatal care during pregnancy. • Health education to reduce and prevent non-related infections to pregnant women. • Administration of steroids during pregnancy. • Continue to monitor treatment of syphilis positive pregnant women and ensure that they receive Benzathine Penicillin timely. • Strengthen implementation and monitor monthly improved screening	11.8	13							
		Neonatal death in facility rate - Total	Standardized	Not Applicable	Text	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	13.3/1000	12.9	Increased Kangaroo mother care coverage and coverage of continuous positive airway pressure (CPAP).	13.3/1000	0							
		Death under 5 years against live birth rate - Total	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	1.9	1.9	No deviation.	1.9	0							
	Primary Health Care	Severity assessment code (SAC) 1 incident reported within 24 hours rate - PHC	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	64	82.6	Non-adherence to guidelines noted in some Districts.	65	64							
		Patient Safety Incident (PSI) case closure rate -PHC facility	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	95	103	PSIs that were being investigated during Q1 were closed in Q2.	95	103							
	Programme 3: Emergency Medical Services	Programme 3: Emergency Medical Services																		
		EMS P1 urban response under 30 minutes rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health		The Social Protection, Community and Human Development cluster	50	43.7	• Inadequate base infrastructure. • Increased demand for inter facility transfers. • Insufficient resources (ambulances and staff) resulting in National norms not being met. • High compulsory overtime expenditure. • Fleet Management have been actively involved in fast tracking vehicle maintenance and repairs in order to reduce downtime of emergency vehicles, which has proven effective and will continue. • Identify satellite bases that are strategically placed. • EMS operational staff roster and working hours to be revised in order to reduce the compulsory overtime	50	40							
		EMS P1 rural response under 60 minutes rate	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health		The Social Protection, Community and Human Development cluster	55	48.7	• Inadequate base infrastructure. • Increased demand for inter facility transfers. • Insufficient resources (ambulances and staff) resulting in National norms not being met. • High compulsory overtime expenditure. • Fleet Management have been actively involved in fast tracking vehicle maintenance and repairs in order to reduce downtime of emergency vehicles, which has proven effective and will continue. • Identify satellite bases that are strategically placed. • EMS operational staff roster and working hours to be revised in order to reduce the compulsory overtime	55	47							
	Programme 4: Provincial Hospital Services	Chronic Hospitals																		
		Severity assessment code (SAC) 1 incident reported within 24 hours rate - Chronic/Special Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	100	0	There were no incidents to report.	100	0							
		Patient Safety Incident (PSI) case closure rate - Chronic/Special Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	100	100	No deviation.	100	100							
		Psychiatric Hospitals																		
		Severity assessment code (SAC) 2 incident reported within 24 hours rate - Psychiatric Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	90	100	Adherence to the National Guideline for PSI reporting & learning in the health sector of SA by health establishments.	95	100							

		Patent Safety Incident (PSI) case closure rate – Psychiatric Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	92	85.7	Due to the nature of the incidents which occurred in the reporting period, some PSIs were still under investigation at the end of September 2023.	Districts will be reminded to have PSI management meetings as per schedule and on demand in order to expedite investigations and reduce carry overs.	92	0						
Regional Hospitals		Severity assessment code (SAC) 1 incident reported within 24 hours rate – Regional Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	90.2	98.6	There is improvement in understanding and reporting of SAC 1 incidents by the Clinical Management teams (Clinical Managers, QM Managers, Nurse Managers, IPC Managers) at facility level.		90.2	100						
		Patent Safety Incident (PSI) case closure rate – Regional Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	97	103.3	Closure of PSIs carried over from the previous quarter.		97	93						
		Number of Deaths in facility under 5 years – Regional Hospitals	Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	438	405	Strengthening of regional level paediatric critical care services and roll-out of Essential Packages of Care and dashboards.		1754	907						
		Child under 5 years diarrhoea case fatality rate – Regional Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	1.7	1.6	Maintaining PHC programmes for the management of children with diarrhoea at community by using ORS corners at clinics.		1.7	0						
		Child under 5 years pneumonia case fatality rate – Regional Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	2.2	2.8	Target was not achieved due to high preterm birth, low birth weight (LBW) & IYI and HIV exposed babies.	<ul style="list-style-type: none"> <li>• Early ANC booking is encouraged at the community level.</li> <li>• Prompt referral of sick babies for earlier escalation to respiratory</li> </ul>	2.2	0						
		Child under 5 years Severe Acute Malnutrition case fatality rate – Regional Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	7.6	9.6	Contributing factors include: <ul style="list-style-type: none"> <li>• Poor infant and young child feeding practices</li> <li>• Co-morbid conditions</li> <li>• Congestive Heart Failure</li> </ul>	<ul style="list-style-type: none"> <li>• Continue with training on inpatient management of SAM</li> <li>• Training on infant and young child feeding.</li> <li>• Mother and Baby Friendly Initiative (MBFI) implementation.</li> </ul>	7.6	0						
TB Hospitals		Severity assessment code (SAC) 1 incident reported within 24 hours rate – TB Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	100	0	There were no incidents to report.		95	0						
		Patent Safety Incident (PSI) case closure rate – TB Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	100	100	No deviation.		100	100						
Programme 5: Central Hospital Services	Central Hospitals	Severity assessment code (SAC) 1 incident reported within 24 hours rate – Central Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	100	100	No deviation.		95	100						
		Patent Safety Incident (PSI) case closure rate – Central Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	100	100	No deviation.		100	100						
		Number of Deaths in facility under 5 years – Central Hospital	Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	46	42	Target was achieved by sharing of the burden of more complex condition with tertiary services in the province.		185	97						
		Child under 5 years pneumonia case fatality rate – Central Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	8.4	95.3	Children with pneumonia are not referred in time due to inadequate high care and intensive care beds in districts.	Establish district paediatric critical care services and address gaps in the referral system.	8.4	0						
		Child under 5 years Severe acute malnutrition case fatality rate – Central Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	8.3	4	Training of medical interns and professional nurses for early diagnosis and management of SAM cases.		8.3	4						
Tertiary Hospitals		Severity assessment code (SAC) 1 incident reported within 24 hours rate – Tertiary Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	100	100	No deviation.		100	100						
		Patent Safety Incident (PSI) case closure rate – Tertiary Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	96.4	102.8	Closure of the residual PSIs from the previous quarter.	Districts will be reminded to have PSI management meetings as per schedule and on demand in order to reduce carry overs.	96.4	0						
		Number of Deaths in facility under 5 years – Tertiary Hospital	Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	71	76	Contributing factors include: <ul style="list-style-type: none"> <li>• Late antenatal care booking not allowing adequate opportunity for screening, testing and treatment of all pregnancy and non pregnancy related conditions.</li> <li>• Delays in the referral for children due to inadequate high care and intensive care beds in districts.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to raise awareness in communities on the importance of early antenatal care bookings.</li> <li>• Establish high care beds in every district to improve referrals turnaround time.</li> </ul>	285	141						
		Child under 5 years diarrhoea case fatality rate – Tertiary Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	1.2	3.3	<ul style="list-style-type: none"> <li>• There are delays in referral for children due to inadequate high care and intensive care beds in districts.</li> </ul>	<ul style="list-style-type: none"> <li>• Maintain existing PHC programmes and oral rehydration corners in every clinic and CHC.</li> <li>• Establish high care beds in every district.</li> </ul>	1.2	0						
		Child under 5 years pneumonia case fatality rate – Tertiary Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	2.5	6.6	<ul style="list-style-type: none"> <li>• There are delays in referral for children due to inadequate high care and intensive care beds in districts.</li> </ul>	Maintain existing PHC programmes and strengthen paediatric critical care services.	2.5	0						
	Child under 5 years Severe acute malnutrition case fatality rate – Tertiary Hospital	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	0	11.1	<ul style="list-style-type: none"> <li>• There are delays in referral for children due to inadequate high care and intensive care beds in districts.</li> </ul>	Continue with training on IMCI to encourage case detection of MAM and SAM at district hospital level.	0	0							
Programme 7: Health Care Support Services	Health Care Support Services	Tracer Medicine Stock-Out Rate at the Provincial Pharmaceutical Supply Depot (PPSD)	Non-Standardized	Not Applicable	Test	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	± 5%	1.7	Follow up on suppliers with overdue orders. Ration the stock of products with supply constraints. Mitigated risks for transitioning into new contracts.		± 5%	-						
		Tracer Medicine Stock-Out Rate at facilities (hospitals, community health centres and clinics)	Non-Standardized	Not Applicable	Test	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	± 5%	2.1	Maintained the process of following up on suppliers with overdue orders. PPSD rationed the stock of products with supply constraints to ensure all facilities were covered.		± 5%	-						
Programme 8: Health Facilities Management	Health Facilities Management	Percentage of health facilities with completed capital infrastructure projects (Programme 8)	Standardized	Not Applicable	Percentage	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	0	74.3	Introduction of Bill Compliance Clinic maintenance and upgrading programme resulted in projects being completed although none were planned for this quarter.	No further action required as the annual target has been achieved.	100	0						
		Number of jobs created through the EPWP	Non-Standardized	Not Applicable	Number	Priority 3: Education, Skills And Health	Basic Services	The Social Protection, Community and Human Development cluster	625	529	Although the 2nd quarter target was not met, the annual target has been achieved as a result of the over performance in Q1.	Even though the annual target has been achieved, job creation may continue in line with available funding.	2500	2618						
<b>Total</b>																				
<b>Feedback</b>																				
<b>Quarter - 1</b>																				
Username Q1	Role Q1	Feedback Q1	Dated Q1																	
<b>Quarter - 2</b>																				
Username Q2	Role Q2	Feedback Q2	Dated Q2																	
<b>Quarter - 3</b>																				
Username Q3	Role Q3	Feedback Q3	Dated Q3																	
<b>Audited Annual</b>																				
Username	Role	Feedback	Dated																	
Thank you for the report and do take note of the comments/recommendations.																				

				Nevasha Moodley	Department Coordinator	Dear Dr Tshabalala,													
Lulama Shembela Ndizi	QIP Coordinator	Thank you for the report, corrective action statements and positive variances are noted.	26/07/2023	Dr Sandile Tshabalala	Accounting Officer	Approval Certificate: Q2- Dear Sir/Madam													
Nevasha Moodley	Department Coordinator	Dear Sir/Madam	27/07/2023																
Nevasha Moodley	Department Coordinator	Dear Mad, kindly find attached Q2 performance report for the Department.	31/07/2023																
Francis Pretorius	National Oversight	Report noted, thank you	28/07/2023																