



## 2025/26 **QUARTER 1** ANNUAL PERFORMANCE PLAN (APP) REPORT

TARGET ACHIEVABILITY	
13/34 = 38.2%	Target met
21/34 = 61.8%	Target not met

### OUTCOME: REDUCED MORBIDITY & MORTALITY AND IMPROVED CLIENT EXPERIENCE OF CARE

Performance Indicators	2024/25 Performance	2025/26 Annual Target	Quarterly Progress		Reason for Deviation	Resolution / Intervention
			Target 1 <sup>st</sup> Quarter	Prelim 1 <sup>st</sup> Quarter		
PROGRAMME 1: ADMINISTRATION						
1. Number of districts capacitated to implement National Health Insurance (NHI) Contracting unit sites	Not monitored	4	1	4	uMzinyathi, Ugu, Amajuba and uThukela Districts have been trained on Contracting Units for Primary Health Care (CUP). Trainings included District and subdistrict management. Nquthu sub-district is the official CUP site identified by the National Department of Health (NDOH). CUPs sites have been identified in all the trained districts.	
PROGRAMME 2: DISTRICT HEALTH SERVICES						
Sub-Programme: Primary Health Care (PHC)						
2. Number of school grade R learners screened	64 309	63 000	25 000	17 520	Limited resources as well as the focus on the Tuberculosis (TB) Campaign in schools impacted negatively on Grade R screening services.	<ul style="list-style-type: none"><li>Integrated outreach teams to provide comprehensive services.</li><li>Prioritization of grade R screening during the 2nd quarter.</li></ul>
Sub-Programme: Human Immunodeficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS), Sexually Transmitted Infections (STI) & Tuberculosis (TB) Control						
3. HIV positive 5-14 years (excl ANC) rate	0.45% [1 005/ 222 930]	0.6% [1 399/ 220 857]	0.6% [350/ 55 215]	0.5% [235/ 47 381]	A gradual decrease in the positivity rate amongst this group may be attributed to the educational marketing campaigns through games, pamphlets and physical	



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					education at facility level and during event days.	
4. HIV positive 15-24 years (excl ANC) rate	1.6% [13 922/ 872 421]	1.8% [14 803/ 843 648]	1.8% [3 701/ 210 912]	1.5% [2 831/ 190 426]	A gradual decrease in the positivity rate amongst this group may be attributed to: <ul style="list-style-type: none"> <li>Educational marketing campaigns through games, pamphlets and physical education at facility level and during event days.</li> <li>Uptake of biomedical HIV prevention like pre-exposure prophylaxis (PrEP), condom use and male medical circumcision.</li> </ul>	
5. ART adult remain in care rate [12 months]	67.8% [52 516/ 77 441]	67.9% [70 005/ 103 049]	67.9% [17 502/ 25 763]	69.8% [13 258/ 19 002]	Treatment adherence by newly initiated patients.	
6. ART child remain in care rate [12 months]	80.3% [1 261/ 1 571]	78.9% [1 723/ 2 184]	78.9% [431/ 546]	83.5% [319/ 382]	Implementation of "Know your Child" and "Mommy clinician" strategies.	
7. ART adult viral load suppressed rate (below 50) [12 months]	82.7% [35 808/ 43 310]	81.5% [43 835/ 53 806]	81.5% [10 959/ 13 452]	80.2% [8 845/ 11 034]	Low level viremia, linked to sub-optimal adherence to the treatment plan, lead to non-suppression.	<ul style="list-style-type: none"> <li>Implementation of Enhanced Adherence Counselling outlining issues contributing to unsuppressed viral load.</li> <li>Implementation of Undetectable Equals Untransmittable (U = U) in collaboration with Civil Society to foster treatment literacy.</li> </ul>



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8. ART child viral load suppressed rate (below 50) [12 months]	55.7% [599/ 1 076]	51.9% [707/ 1 361]	51.9% [177/ 341]	58.5% [159/ 272]	<ul style="list-style-type: none"> <li>Implementation of the “Know Your Child” strategy which encourages the allocation of health care workers to case manage children.</li> <li>Child disclosure capacity building and implementation is beginning to yield results.</li> </ul>	
9. All DS-TB client Treatment Success Rate	75.8% [34 248/ 45 204]	74.9% [38 843/ 51 868]	74.9% [9 711/ 12 967]	78% [8 799/ 11 280]	Consistent improvement in linkage to care, and improved recording of transferred-out patients.	
10. TB – Rifampicin resistant/ Multidrug-Resistant Treatment Success Rate	69.2% [1 203/ 1 739]	68.1% [1 101/ 1 617]	68.1% [276/ 405]	86.5% [308/ 356]	Significant improvement as a result of the roll-out of the shorter, more effective treatment regimen, which has reduced the death rate to 4.2% and loss to follow-up to 7.6%, reflecting better adherence and improved tolerability.	
11. Number of DS-TB treatment start 5 years and older	New	49 276	12 319	5 603	The introduction of new tools from April 2025 lead to recording and reporting challenges, especially in Zululand and Umzinyathi districts.	<ul style="list-style-type: none"> <li>Zululand and Umzinyathi to verify data and update the District Health information System (DHIS).</li> <li>In-service TB Coordinators on new TB recording and reporting tools by August 2025.</li> <li>Districts to track TB testing among patients on ART during annual viral load visits, TB</li> </ul>



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						contacts, and patients previously treated for TB. <ul style="list-style-type: none"> <li>Analysis on urinary lipoarabinomannan (ULAM) implementation across all facilities and engage districts with poor performance.</li> </ul>
12. Number of DS-TB treatment start under 5 years	New	2 592	648	280	Challenges in under-five years TB case finding due to Ante Retro-Viral, TB & Prevention of Mother to Child Transmission Interlinked Electronic Register (TIER.net) recording issues in relation to children diagnosed and treated, particularly in hospitals and in the Integrated Management of Childhood Illnesses (IMCI) stream.	<ul style="list-style-type: none"> <li>District TB/HAST coordinators to monitor recording and reporting in paediatric streams.</li> <li>Doctors and hospital nurses were trained across all districts in February and March 2025 on paediatric TB management including linkage to care.</li> <li>Implementation of Urinary Lipoarabinomannan (ULAM) in children as per new guideline to improve case finding.</li> </ul>
13. TB Rifampicin resistant/ Multidrug-Resistant treatment start	1 739 [2023]	1 617	405	261	Although the target is not met, this is a sign of the general decline in drug-resistant TB case detection nationally which is an indication of progress in controlling the epidemic.	Monitor laboratory results to ensure all patients with positive results are promptly linked to care.
14. ART adult remain on ART end of period	1 544 057	1 646 150	1 570 349	1 546 921	Patient non-adherence to treatment resulting in lost follow up.	<ul style="list-style-type: none"> <li>Implementation of the “1.1 Million closing the treatment gap” activities, directed at improving linkage and retention.</li> </ul>



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						<ul style="list-style-type: none"> <li>Implement 6MMD model which allows “stable” clients to receive a six-month supply of antiretrovirals and visit the health facility twice a year, to support retention in care.</li> <li>A contingency plan has been developed and implemented to mitigate further risk of partner exit.</li> <li>Scale-up of decanting eligible men to support retention by providing treatment collection options.</li> </ul>
15. ART child under 15 years remain on ART end of period	25 142	28 470	26 034	24 458	Loss to follow is the main contributing factor in not achieving optimal retention.	<ul style="list-style-type: none"> <li>Implementation of “Know Your Child” strategy.</li> <li>Allied Health Workers have been trained on retention strategies to support retention of children in care.</li> <li>Scale up implementation of Global Alliance strategy to end HIV in children by 2030 has increased from two to four districts. (Zululand, Ilembe, uThukela and uMgungundlovu)</li> </ul>
<b>Sub-Programme: Maternal, Neonatal, Child &amp; Women's Health &amp; Nutrition</b>						
16. Couple Year Protection Rate	68.2% [2 192 017/ 3 214 285]	64.0% [2 056 629/ 3 212 938]	64% [514 158/ 803 235]	56.7% [459 699/ 812 363]	The low uptake is associated with limited community awareness	<ul style="list-style-type: none"> <li>Increase community awareness through Advocacy, communication and social mobilization (ASCM).</li> </ul>



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						<ul style="list-style-type: none"> <li>Integrate contraceptive services with other services e.g. Chronic streams, Isibhedlela Kubantu.</li> </ul>
17. Number of deliveries 10-14 years in facility	523	537	135	130	Implementation of the Strategy to reduce Child and Teenage Pregnancy together with the Integrated Multi-Stakeholder Health Promotion Strategy increased awareness and education amongst communities and departments.	
18. Antenatal 1 <sup>st</sup> visit before 20 weeks rate	78.5% [139 178/ 177 353]	76.5% [155 965/ 203 758]	76.5% [38 992/ 50 940]	76.3% [31 296 / 40 994]	Unavailability of pregnancy test kits due to lack of a contract negatively impacted household and in-facility pregnancy testing.	Procure test kits to continue implementation of the household and in-facility pregnancy testing strategy, for prompt referral for antenatal care to increase early booking.
19. Mother postnatal visit within 6 days rate	87.1% [141 173/ 162 142]	83.4% [157 581/ 189 056]	83.4% [39 396/ 47 264]	83.2% [34 302 / 41 212]	Cross border patients and farm/industrial workers contribute to poor performance as mothers and babies return to their homes after delivery.	<ul style="list-style-type: none"> <li>Educate mothers on the importance of post-natal care.</li> <li>Facilitate linkage to care post-delivery by alerting PHC clinics of the clients they must expect for post-natal care.</li> </ul>
20. Infant 1 <sup>st</sup> PCR test positive at birth rate	0.26% [133/ 50 319]	0.35% [221/ 63 970]	0.35% [56/ 15 993]	0.28% [35/ 12 427]	<ul style="list-style-type: none"> <li>ART initiation of HIV positive pregnant women.</li> <li>Pregnant women who are HIV negative are initiated on PrEP to reduce seroconversions during pregnancy.</li> </ul>	



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21. Immunisation under 1 year coverage	85.5% [215 122/ 251 511]	95% [249 679/ 262 851]	95.0% [62 420/ 65 713]	81.8% [51 210/ 62 763]	Lack of awareness amongst mothers and care givers regarding vaccination of babies at health facilities.	Effective communication on vaccination uptake via social media platforms to educate and remind mothers and caregivers to fully vaccinate their children.
22. MR 2nd dose 1 year coverage	88.2% [221 963/ 251 547]	95.0% [246 900/ 259 894]	95% [61 725/ 64 974]	84.8% [53 019/ 62 720]		
23. Child under 5 years diarrhoea case fatality rate	1.2% [121/ 10 162]	1.2% [117/ 10 028]	1.2% [30/ 2 507]	1.6% [26/ 1 603]	Deaths were associated with late presentation with advanced disease.	<ul style="list-style-type: none"> <li>Strengthen rotavirus vaccine coverage and compliance with well situated and functional oral rehydration therapy (ORT) corners.</li> <li>Capacitation of clinicians and staff on Integrated management of Childhood illnesses (IMCI).</li> </ul>
24. Child under 5 years pneumonia case fatality rate	1.5% [143/ 9 831]	2% [211/ 10 786]	2% [53/ 2 697]	1.4% [50/ 3 521]	Increased access to respiratory support equipment, together with early identification and effective case management.	
25. Child under 5 years severe acute malnutrition (SAM) case fatality rate	6.4% [118/ 1 857]	6.7% [136/ 2 029]	6.7% [34/ 508]	7.8% [32/ 409]	Disease related malnutrition identified as a contributing factor to death (cerebral palsy, congenital heart disease).	<ul style="list-style-type: none"> <li>Continued training on the inpatient management of SAM.</li> <li>Finalise guidelines for the inpatient management of SAM.</li> </ul>
26. Cervical Cancer Screening Coverage	69.7% [257 952/ 370 066]	69.6% [270 498/ 388 411]	69.6% [67 625/ 97 103]	63.2% [59 052/ 93 639]	Limited awareness at the community level.	<ul style="list-style-type: none"> <li>Raise awareness about early cervical cancer screening at both facility and community levels will result in a greater number of women being empowered and taking pro-</li> </ul>





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						<p>active measures in seeking screening services.</p> <ul style="list-style-type: none"> <li>Integrate cervical screening services into existing sexual and reproductive health and antenatal care services ensuring all eligible women are screened at entry points at primary care level.</li> </ul>
<b>Sub-Programme: Disease Prevention and Control (DP&amp;C)</b>						
27. PHC Mental Disorders Treatment Rate New	0.04% [9 085/ 24 246 619]	0.01% [2 492/ 24 925 939]	0.01% [623/ 6 231 485]	0.05% [2 982/ 5 784 093]	<ul style="list-style-type: none"> <li>Enhanced knowledge and understanding of the mental health screening tool and recording process through trainings conducted with PHCs and Community Health Centres (CHCs) and support visits conducted in the quarter.</li> <li>Engagements with District Mental Health Coordinators, Registered Counsellors and Facility Information Officers where the indicator recording and reporting, challenges and recommendations were discussed.</li> </ul>	





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28. Percentage of Community Health Centres (CHC) with at least one mental health provider appointed	New	100% [23/23]	100% [23/23]	100% [23/23]	No deviation.	
PROGRAMME 3: EMERGENCY MEDICAL SERVICES (EMS)						
29. EMS P1 urban response under 30 minutes rate	37% [30 390/ 82 037]	42.1% [43 054/ 102 299]	42.1% [10 764/ 25 575]	26.7% [4 869/ 18 238]	Insufficient operational ambulances and response units available to attend to the demand for services. The majority of emergency vehicles are aged increasing the frequency of repairs and vehicle downtime.	<ul style="list-style-type: none"><li>EMS has requested approval to procure 30 new ambulances in 2025/26.</li><li>Continuous engagement with Fleet Management and Wesbank to improve turn-around times for vehicle repairs and maintenance.</li></ul>
30. EMS P1 rural response under 60 minutes rate	44.9% [59 991/ 133 714]	46.9% [67 671/ 144 268]	46.9% [16 918/ 36 067]	43.3% [12 679/ 29 287]		
PROGRAMME 7: HEALTH CARE SUPPORT SERVICES						
31. Tracer Medicine Stock-Out Rate at the Provincial Pharmaceutical Supply Depot (PPSD)	1.9% [18/924]	2.4% [22/924]	2.6% [6/231]	4.8% [11/231]	<ul style="list-style-type: none"><li>Some items had supply constraints emanating from suppliers/manufacturers having a shortage of raw materials, batch failures, etc.</li><li>Actual demand exceeded the forecasted demand.</li></ul>	<ul style="list-style-type: none"><li>Maintain redistribution and rationing of stock.</li><li>Input into national procurement processes for assistance (e.g., bulk section 21 approval from South African Health Products Regulatory Authority (SAHPRA), National Essential Medicines List Committee (NEMLC) recommendation of therapeutic alternatives, etc.)</li></ul>
32. Tracer Medicine Stock-Out Rate at facilities (hospitals, community health centres and clinics)	1.9% [11 773/ 624 681]	1.6% [12 171/ 749 577]	1.6% [3 043/ 187 395]	2.8% [5 422/ 191 478]		



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PROGRAMME 8: HEALTH FACILITIES MANAGEMENT						
33. Percentage of preventative maintenance expenditure	40.6% [87 190 085/ 214 622 169]	47.6% [105 000 000/ 220 760 000]	47.6% [26 250 000/ 55 190 000]	36.7% [30 645 212/ 83 436 662]	Major breakdowns reported resulting in higher expenditure in Category A and under-expenditure on preventative maintenance.	Institutions to service machinery and equipment regularly to limit major breakdowns.
34. Number of Capital Infrastructure Projects completed	133	40	10	4	Delays in payments to service providers impacted negatively on the progress of projects.	Implement an invoice tracking tool to fast-track payments and continually engage Supply Chain Management (SCM).