

QUARTERLY PERFORMANCE REPORTS: 2014/15 - 2nd Quarter
LIMPOPO

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2014/15 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Actual output - validated	2nd Quarter Planned output as per APP	2nd Quarter Preliminary output
QUARTERLY OUTPUTS					
Programme 1: Administration					
Proportion of health facilities connected to the internet	0%	0%	8.1%	0%	8.1%
Programme 2: District Health Services					
PHC Utilisation rate	2.7	2.7	2.6	2.7	2.4
OHH registration visit coverage	12.0%	12.0%	87.3%	12.0%	63.6%
PHC supervisor visit rate (fixed clinic/CHC/CDC)	90.0%	90.0%	87.7%	90.0%	79.1%
Complaint resolution within 25 working days rate	68.0%	68.0%	84.7%	68.0%	92.2%
Number of fully fledged District Clinical specialist Teams appointed	1	1	-	1	-
Number of fully-fledged Ward Based Outreach Teams appointed	75	75	91	75	91
School ISHP coverage	10.0%	0%	9,929.2%	0%	17,065.3%
School Grade 1 screening coverage	10.0%	0%	29.9%	0%	48.7%
School Grade 4 screening coverage	20.0%	0%	15.4%	0%	34.4%
School Grade 8 screening coverage	20.0%	0%	6.7%	0%	11.0%
Percentage of fixed facilities that have conducted gap assessments for compliance against the National Core Standards	36.0%	0%	5.8%	0%	5.8%
Compliance Rate of PHC Facilities (of National Core Standards)	0%	0%	55.9%	0%	55.9%
District Hospitals					
Average Length of Stay	4.4 days	4.4 days	4.4 days	4.4 days	4.3 days
Inpatient Bed Utilisation Rate	70.0%	70.0%	67.7%	70.0%	77.7%
Expenditure per patient day equivalent (PDE)	R 2,100	R 2,100	R 2,615	R 2,100	R 2,431
Complaint Resolution within 25 working days rate	80.0%	80.0%	95.9%	80.0%	100.0%
Mental health admission rate	0%	0%	1.9%	0%	2.0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core Standards	100.0%	20.0%	16.7%	50.0%	16.7%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%
HIV and AIDS, TB and STI control					
Total clients remaining on ART (TROA) at end of the month	190,000	188,000	194,118	189,000	-
Number of Medical Male Circumcisions conducted	62,000	3,000	9,796	62,000	-
TB (new pulmonary) defaulter rate	<5%	<5%	4.2%	<5%	4.0%
TB AFB sputum result turn-around time under 48 hours rate	32.0%	32.0%	50.8%	32.0%	50.7%
TB new client treatment success rate	60.0%	60.0%	76.2%	60.0%	26.6%
HIV testing coverage (15-49 Years - Annualised)	99.0%	99.0%	37.5%	99.0%	38.5%
TB (new pulmonary) cure rate	75.0%	75.0%	72.4%	75.0%	72.4%
TB MDR confirmed treatment initiation rate	47.0%	47.0%	100.0%	47.0%	92.9%
Maternal, child and women health					
Immunisation coverage under 1 year	90.0%	90.0%	77.1%	90.0%	71.7%
Vitamin A coverage 12-59 months	40.0%	40.0%	36.4%	40.0%	37.6%
Deworming 12-59 months coverage	90.0%	90.0%	28.7%	90.0%	19.1%
Child under 2 years underweight for age incidence	0.44	0.44	24.48	0.44	21.66
Measles 1st dose under 1 year coverage	90.0%	90.0%	89.4%	90.0%	79.3%
Pneumococcal Vaccine (PCV) 3rd Dose Coverage	90.0%	90.0%	86.8%	90.0%	81.6%
Rotavirus (RV) 2nd Dose Coverage	90.0%	90.0%	90.2%	90.0%	91.3%
Cervical cancer screening coverage	55.0%	55.0%	46.7%	55.0%	49.9%
HPV Vaccine Coverage amongst Grade 4 girls	60.0%	0%	50.5%	0%	50.5%
Antenatal 1st visits before 20 weeks rate	45.0%	45.0%	45.4%	45.0%	51.4%
Infant given NVP within 72 hours after birth uptake rate	50.0%	50.0%	98.9%	50.0%	99.6%
Infant 1st PCR Test positive around 6 weeks rate	< 2	< 2	2.1%	< 2	2.4%
Couple year protection rate	45.0%	45.0%	33.9%	45.0%	37.7%
Disease Prevention and Control					
Hypertension incidence	0.16	-	15.76	-	12.10
Diabetes incidence	0.02	-	10.82	-	9.78
Cataract surgery rate (Uninsured Population)	1,000.0	1,000.0	537.5	1,000.0	1,043.6
Programme 3: Emergency Medical Services					
EMS operational ambulance coverage	0.30	0.30	0.16	0.30	0.49
EMS P1 urban response under 15 minutes rate	50.0%	50.0%	56.7%	50.0%	35.1%
EMS P1 rural response under 40 minutes rate	53.0%	53.0%	80.1%	53.0%	326.5%
EMS P1 call response under 60 minutes rate	55.0%	55.0%	62.6%	55.0%	339.7%
Programme 4: Provincial Hospital Services					
General (regional) hospitals					
Average Length of Stay	5.0 days	5.0 days	5.6 days	5.0 days	5.5 days
Inpatient Bed Utilisation Rate	65.0%	65.0%	71.5%	65.0%	79.4%
Expenditure per patient day equivalent (PDE)	R 2,544	R 2,544	R 2,470	R 2,544	R 2,096
Complaint Resolution within 25 working days rate	80.0%	80.0%	100.0%	80.0%	100.0%
Mental health admission rate	0%	0%	2.1%	0%	1.7%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core Standards	100.0%	100.0%	20.0%	100.0%	20.0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%

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QUARTERLY OUTPUTS					
Programme 5: Central Hospital Services					
Tertiary Hospitals					
Average Length of Stay	7.0 days	7.0 days	7.3 days	7.0 days	7.1 days
Inpatient Bed Utilisation Rate	75.0%	75.0%	74.0%	75.0%	77.4%
Expenditure per patient day equivalent (PDE)	R 3.500	R 3.500	R 3.466	R 3.500	R 3.427
Complaint Resolution within 25 working days rate	90.0%	90.0%	100.0%	90.0%	100.0%
Mental health admission rate	0%	0%	0.7%	0%	0.8%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core Standards	100.0%	100.0%	0%	100.0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%
Central Hospitals					
Average Length of Stay	-	-	-	-	-
Inpatient Bed Utilisation Rate	0%	0%	0%	0%	0%
Expenditure per patient day equivalent (PDE)	R 0	R 0	R 0	R 0	R 0
Complaint Resolution within 25 working days rate	0%	0%	0%	0%	0%
Mental health admission rate	0%	0%	0%	0%	0%
Percentage of Hospitals that have conducted gap assessments for compliance against the National Core Standards	0%	0%	0%	0%	0%
Proportion of hospitals assessed as compliant with the Extreme Measures of National Core Standards	0%	0%	0%	0%	0%
Programme 8: Health Facilities Management					
Proportion of Programme 8 budget spent on maintenance (preventative and scheduled)	3.7%	3.7%	20.8%	3.7%	13.8%
Number of districts spending more than 90% of maintenance budget	5	5	5	5	5

I, DR SIBHO KABANE hereby certify that the non-financial data submitted for the current quarter is correct and gives an overview of the performance of the department.

Signed by: Head of the Health Department

Date: 30 / 10 / 2014

I, G. PRATI hereby certify that the non-financial data submitted for the current quarter is correct and gives an overview of the performance of the department.

Signed by: Head of Provincial Treasury

Date: 31 / 10 / 2014