

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
<b>QUARTERLY OUTPUTS</b>			
<b>Programme 4: Provincial Hospital Services</b>			
<b>Regional Hospitals</b>			
National Core Standards self assessment rate (Regional Hospitals)	100.0%	25.0%	0%
Quality improvement plan after self assessment rate (Regional Hospitals)	100.0%	100.0%	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Regional Hospitals)	-	-	0%
Patient Satisfaction Survey Rate (Regional Hospitals)	100.0%	100.0%	100.0%
Average Length of Stay (Regional Hospitals)	5.0 days	5.0 days	5.5 days
Inpatient Bed Utilisation Rate (Regional Hospitals)	75.0%	75.0%	73.6%
Expenditure per PDE (Regional Hospitals)	R 2 600	R 2 600	R 2 959
Complaints resolution rate (Regional Hospitals)	85.0%	85.0%	84.1%
Complaint Resolution within 25 working days rate (Regional Hospitals)	85.0%	85.0%	100.0%
<b>Specialised Hospitals</b>			
National Core Standards self assessment rate (Specialised Hospitals)	100.0%	-	100.0%
Quality improvement plan after self assessment rate (Specialised Hospitals)	100.0%	-	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Specialised Hospitals)	-	-	0%
Patient Satisfaction Survey Rate (Specialised Hospitals)	100.0%	100.0%	100.0%
Complaints resolution rate (Specialised Hospitals)	85.0%	85.0%	100.0%
Complaint Resolution within 25 working days rate (Specialised Hospitals)	85.0%	85.0%	100.0%
<b>Programme 5: Central Hospital Services (C&amp;THS)</b>			
<b>Provincial Tertiary Hospitals Services</b>			
National Core Standards self assessment rate (Tertiary Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Tertiary Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Tertiary Hospitals)	-	-	0%
Patient Satisfaction Survey Rate (Tertiary Hospitals)	100.0%	100.0%	100.0%
Average Length of Stay (Tertiary Hospitals)	7.5 days	7.5 days	5.7 days
Inpatient Bed Utilisation Rate (Tertiary Hospitals)	80.0%	80.0%	98.4%
Expenditure per PDE (Tertiary Hospitals)	R 3 000	R 3 000	R 3 379
Complaints resolution rate (Tertiary Hospitals)	85.0%	85.0%	33.3%
Complaint Resolution within 25 working days rate (Tertiary Hospitals)	85.0%	85.0%	100.0%
<b>Provincial Central Hospitals Services</b>			
National Core Standards self assessment rate (Central Hospitals)	100.0%	-	0%
Quality improvement plan after self assessment rate (Central Hospitals)	100.0%	-	0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core standards (Central Hospitals)	-	-	0%
Patient Satisfaction Survey Rate (Central Hospitals)	100.0%	100.0%	100.0%
Average Length of Stay (Central Hospitals)	7.5 days	7.5 days	8.1 days
Inpatient Bed Utilisation Rate (Central Hospitals)	78.0%	78.0%	93.3%
Expenditure per PDE (Central Hospitals)	R 5 500	R 5 500	R 5 776
Complaints resolution rate (Central Hospitals)	85.0%	85.0%	100.0%
Complaint Resolution within 25 working days rate (Central Hospitals)	85.0%	85.0%	100.0%

Please note that some numbers may have been rounded off.

I, Dr D. MOTAU 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: 01 / 08 / 2016

I, KOPYUNG RALILONTSAMG 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: Director General - Office of the Premier

Date: 05 / 08 / 2016

QUARTERLY PERFORMANCE REPORTS: 2016/17 - 1st Quarter

FREE STATE

Sector: Health

Programme / Subprogramme / Performance Measures	Target for 2016/17 as per Annual Performance Plan (APP)	1st Quarter Planned output as per APP	1st Quarter Preliminary output
<b>QUARTERLY OUTPUTS</b>			
<b>Programme 1: Administration</b>			
Percentage of Hospitals with broadband access	25.0%	-	0%
Percentage of fixed PHC facilities with broadband access	14.0%	-	0%
<b>Programme 2: District Health Services</b>			
<b>District Management</b>			
Percentage of fixed PHC Facilities scoring above 70% on the ideal clinic dashboard	65.0%	17.0%	27.0%
Client Satisfaction Survey Rate (PHC)	85.0%	16.0%	17.7%
OHH registration visit coverage (annualised)	35.0%	35.0%	2.5%
Number of Districts with fully fledged District Clinical Specialist Teams (DCSTs)	5	5	5
PHC utilisation rate	3.2	3.2	2.8
Complaints resolution rate (PHC)	85.0%	85.0%	76.2%
Complaint resolution within 25 working days rate (PHC)	85.0%	85.0%	96.8%
<b>District Hospitals</b>			
National Core Standards self assessment rate (District Hospitals)	100.0%	25.0%	16.7%
Quality Improvement plan after self assessment rate (District Hospitals)	100.0%	100.0%	100.0%
Percentage of Hospitals compliant with all extreme and vital measures of the national core	-	-	0%
Client Satisfaction Survey Rate (District Hospitals)	100.0%	25.0%	79.2%
Average Length of Stay (District Hospitals)	3.0 days	3.0 days	3.4 days
Inpatient Bed Utilisation Rate (District Hospitals)	75.0%	75.0%	70.0%
Expenditure per PDE (District Hospitals)	R 2 300	R 2 300	R 2 858
Complaints resolution rate (District Hospitals)	85.0%	85.0%	80.0%
Complaint Resolution within 25 working days rate (District Hospitals)	85.0%	85.0%	97.7%
<b>HIV and AIDS, STI and TB (HAST)</b>			
Adults remaining on ART – Total	237 953	193 876	188 970
Total Children (under 15 years) remaining on ART – Total	12 878	12 216	9 910
TB/HIV co-infected client on ART rate	85.0%	85.0%	86.7%
Client tested for HIV (incl ANC)	652 059	163 015	174 548
TB symptom 5yrs and older screened rate	70.0%	70.0%	65.0%
Male condom distribution Coverage	50	50	40
Medical male circumcision performed - Total	40 997	8 199	8 939
TB client treatment success rate	85.0%	85.0%	84.3%
TB client lost to follow up rate	5.0%	5.0%	4.9%
<b>Maternal, Child and Women's Health and Nutrition (MCWH&amp;N)</b>			
Antenatal 1st visit before 20 weeks rate	65.0%	65.0%	65.3%
Mother postnatal visit within 6 days rate	85.0%	85.0%	74.2%
Infant 1st PCR test positive around 10 weeks rate	<2%	<2%	1.2%
Immunisation under 1 year coverage (annualised)	95.0%	95.0%	87.3%
Measles 2nd dose coverage (annualised)	87.0%	87.0%	118.1%
DTaP-IPV-Hib-HBV 3- Measles 1st dose drop-out rate	5.5%	5.5%	- 9.6%
Child under 5 years diarrhoea case fatality rate	<3%	<3%	5.8%
Child under 5 years pneumonia case fatality rate	<3%	<3%	2.8%
Child under 5 years severe acute malnutrition case fatality rate	11.0%	11.0%	16.7%
School Grade 1 screening coverage (annualised)	50.0%	50.0%	66.9%
School Grade 8 screening coverage (annualised)	45.0%	45.0%	43.1%
Couple year protection rate (annualised)	60.0%	60.0%	50.4%
Cervical cancer screening coverage (annualised)	60.0%	60.0%	68.1%
Vitamin A 12-59 months coverage (annualised)	65.0%	65.0%	53.3%
Infant exclusively breastfed at HepB (DTaP-IPV-Hib-HBV) 3rd dose rate	87.0%	87.0%	34.1%
<b>Disease Prevention and Control</b>			
Clients screened for hypertension	700 000	175 000	371 780
Clients screened for diabetes	700 000	175 000	262 430
Client screened for Mental Health	632 558	158 139	416 954
Cataract Surgery Rate annualised	1 500	1 500	1 013
Malaria case fatality rate	-	150 000.0%	0%
<b>Programme 3: Emergency Medical Services (EMS)</b>			
EMS P1 urban response under 15 minutes rate	55.0%	55.0%	47.2%
EMS P1 rural response under 40 minutes rate	71.0%	71.0%	71.0%
EMS inter-facility transfer rate	10.0%	10.0%	24.5%