

**QUARTERLY PERFORMANCE REPORTS: 2018/19**

Western Cape

Department of Health

Programme / Sub programme / Performance Measures

Programme / Sub programme / Performance Measures	Target for 2018/19 as per Annual Performance Plan (APP)	1 <sup>st</sup> Quarter Planned output as per APP	1 <sup>st</sup> Quarter Preliminary output	1 <sup>st</sup> Quarter Actual output validated	2 <sup>nd</sup> Quarter Planned output as per APP	2 <sup>nd</sup> Quarter Preliminary output	2 <sup>nd</sup> Quarter Actual output validated	3 <sup>rd</sup> Quarter Planned output as per APP	3 <sup>rd</sup> Quarter Preliminary output	3 <sup>rd</sup> Quarter Actual output validated	4 <sup>th</sup> Quarter Planned output as per APP	4 <sup>th</sup> Quarter Preliminary output	4 <sup>th</sup> Quarter Actual output validated	Pre Audited for 2018/19 Actual Performance
<b>QUARTERLY OUTPUTS</b>														
<b>Programme 1: Administration</b>														
Percentage of hospitals with broadband access	100.0%	98.1%	96.2%	98.1%	100.0%	98.1%	98.1%	100.0%	98.1%	98.1%	100.0%	98.1%	98.1%	98.1%
Percentage of the annual equitable share budget allocation spent	100%	-	-	-	-	-	-	-	-	0%	100%	100%	100%	100%
Percentage of fixed PHC facilities with broadband access	94.8%	91.4%	92.5%	92.5%	93.3%	93.6%	93.2%	94.0%	94.0%	93.2%	95.0%	93.2%	93.5%	93.5%
Audit opinion from Auditor-General of South Africa	Unqualified	-	-	-	-	-	-	-	-	-	Unqualified	Unqualified	Unqualified	Unqualified
Timeous submission of a Human Resource Plan 2015-2019 to DPSA	Yes	-	-	-	-	-	-	-	-	-	Yes	Yes	Yes	Yes
Number of value matches in the Barrett survey	Survey conducted every 2nd year	-	-	-	-	-	-	-	-	-	Survey conducted every 2nd year	Survey conducted every 2nd year	Survey conducted every 2nd year	Survey conducted every 2nd year
Cultural entropy level for WCG-Health	Survey conducted every 2nd year	-	-	-	-	-	-	-	-	-	Survey conducted every 2nd year	Survey conducted every 2nd year	Survey conducted every 2nd year	Survey conducted every 2nd year
<b>Programme 2: District Health Services</b>														
<b>Disease Prevention and Control</b>														
Cataract surgery rate	1 579	1 777	1 619	1 647	1 661	1 653	1 661	1 427	1 786	1 432	1 452	1 416	1 417	1 547
Malaria case fatality rate	1.0%	0.0%	0.0%	0.0%	2.0%	0.0%	3.7%	0.0%	0.0%	0.0%	2.1%	0.0%	0.0%	0.7%
<b>District Health Services</b>														
Ideal clinic status rate	77.5%	-	-	-	-	-	-	-	-	0.0%	72.7%	72.7%	68.20%	72.70%
PHC utilisation rate - Total	2.2	2.2	2.3	2.2	2.3	2.3	2.2	2.1	2.4	2	2	2	2.1	2.1
Complaint resolution within 25 working days rate (PHC)	95.5%	97.2%	94.9%	91.9%	94.6%	98.9%	95.6%	100.2%	94.7%	94.3%	87.8%	96.0%	96.4%	94.6%
<b>District Hospitals</b>														
Hospital achieved 75% and more on National Core Standards self assessment rate (District Hospitals)	87.9%	-	-	100.0%	100.0%	100.0%	100.0%	100.0%	63.6%	71.4%	76.0%	100.0%	84.4%	84.4%
Average length of stay (district hospitals)	3.3	3.3	3.4	3.3	3.2	3.5	3.5	3.2	3.4	4	3	4	3.5	3.5
Inpatient bed utilisation rate (district hospitals)	87.8%	83.1%	92.1%	87.4%	87.4%	84.2%	83.3%	86.9%	95.3%	94.1%	87.6%	89.8%	90.40%	91.40%
Expenditure per PDE (district hospitals)	R 2 345.23	R 2 326.00	R 1 991.00	R 2 102.00	R 2 353.00	R 2 455.00	R 2 383	R 2 360	R 2 366	R 2 382.53	R 2 342.66	R 2 499.15	R 2 623	R 2 385.95
Complaint resolution within 25 working days rate (district hospitals)	93.3%	93.9%	92.0%	82.5%	91.3%	95.7%	87.0%	93.8%	90.5%	91.1%	94.2%	88.0%	89.30%	89.70%
<b>HIV and AIDS, STI and TB (HAST)</b>														
TB programme success rate	81.1%	81.1%	79.2%	79.8%	81.1%	78.1%	80.9%	81.1%	78.2%	79.1%	81.1%	77.1%	77.1%	79.3%
ART retention in care after 12 months	64.4%	64.4%	58.7%	58.4%	64.4%	61.0%	61.3%	60.7%	61.2%	64.4%	61.6%	61.6%	61.6%	61.5%
ART retention in care after 48 months	53.8%	53.8%	47.5%	45.3%	53.9%	45.1%	47.4%	53.7%	50.2%	51.0%	48.8%	48.8%	48.8%	48.1%
Client remain on ART at the end of the month - total	290 000	258 943	255 316	261 256	269 291	261 379	264 507	279 652	268 562	265 431	290 000	272 766	278027	278027
TB/HIV co-infected client on ART rate	88.1%	88.2%	89.9%	89.9%	88.1%	90.5%	90.6%	88.2%	89.9%	90.5%	88.1%	89.7%	89.80%	90.20%
HIV test done - Total	1 512 567	364 770	401 180	411 155	388 872	510 966	492 781	374 860	496 860	427 147	384 065	447 239	449694	1783343
Male condom distributed	112 819 962	27 246 021	24 600 300	25 315 800	29 265 499	29 759 100	28 626 800	28 162 427	32 015 400	28 049 000	28 126 015	20 486 100	21331200	10322600
Medical male circumcision - total	18 000	4 563	3 870	3 927	5 514	3 269	3 366	3 977	3 363	2 794	3 946	3 323	3 568	14217
TB client 5 years and older start on treatment rate	92.5%	92.5%	89.9%	89.4%	92.4%	87.5%	89.1%	92.4%	90.0%	89.5%	92.6%	89.4%	90%	89.50%
TB client treatment success rate	81.1%	81.1%	79.2%	79.8%	81.1%	78.1%	80.9%	81.1%	78.2%	79.1%	81.1%	77.1%	77.7%	79.2%
TB client lost to follow up rate	9.7%	9.7%	11.3%	11.5%	9.7%	10.0%	10.4%	9.7%	11.2%	11.2%	9.7%	11.0%	11.2%	11.1%
TB client death rate	3.7%	-	-	-	-	-	-	-	-	0.0%	3.9%	3.9%	3.9%	3.9%
TB MDR treatment success rate	43.0%	-	-	-	-	-	-	-	-	0.0%	50.7%	50.7%	51.2%	51.2%
<b>Maternal, Child and Women's Health and Nutrition (MCWH&amp;N)</b>														
Antenatal 1st visit before 20 weeks rate	70.3%	69.5%	69.2%	69.4%	70.6%	70.4%	70.5%	71.1%	70.2%	70.5%	70.1%	69.1%	69.8%	70.3%
Mother postnatal visit within 6 days rate	62.4%	61.2%	63.1%	59.3%	63.1%	65.1%	59.7%	63.1%	60.7%	59.5%	62.2%	62.1%	61.1%	59.6%
Antenatal client start on ART rate	86.8%	-	-	-	-	-	-	-	-	0.0%	77.9%	77.9%	78.4%	78.4%
Infant 1st PCR test positive around 10 weeks rate	0.8%	0.9%	0.5%	0.4%	0.8%	0.4%	0.2%	0.8%	0.8%	0.5%	0.8%	0.5%	0.5%	0.3%
Immunisation under 1 year coverage	78.3%	83.1%	86.2%	83.8%	81.3%	82.3%	80.7%	74.5%	87.5%	80.1%	74.2%	85.5%	86.3%	82.9%
Measles 2nd dose coverage	79.2%	84.1%	78.0%	76.0%	82.3%	79.6%	77.2%	75.3%	82.0%	75.2%	75.0%	83.7%	81.9%	77.7%
Diarrhoea case fatality rate	0.3%	0.2%	0.1%	0.1%	0.3%	0.4%	0.3%	0.3%	0.1%	0.1%	0.6%	0.3%	0.2%	0.1%
Pneumonia case fatality rate	0.5%	0.5%	0.5%	0.2%	0.5%	0.3%	0.3%	0.4%	0.3%	0.3%	0.5%	0.3%	0.2%	0.2%
Severe acute malnutrition case fatality rate	1.4%	1.3%	2.6%	2.8%	3.3%	3.2%	1.7%	0.0%	0.0%	1.0%	0.0%	0.7%	1.6%	
School Grade 1 learners screened	55 646	20 873	23 156	19 660	12 361	7 340	8 174	14 086	11 667	3 935	8 326	3 105	2633	17686
School Grade 8 learners screened	11 964	3 697	6 707	4 792	2 270	2 079	1 738	2 592	1 937	1 178	3 405	891	422	4063
Delivery in 10 to 19 years in facility rate	10.3%	10.3%	11.1%	10.9%	10.3%	12.0%	11.8%	10.2%	11.4%	11.6%	10.3%	11.3%	11.2%	11.4%
Couple year protection rate (Int)	74.2%	72.5%	73.8%	74.7%	76.0%	83.4%	81.3%	73.8%	89.7%	79.9%	74.5%	66.9%	67.3%	75.9%
Cervical cancer screening coverage (annualised)	55.8%	53.2%	54.5%	54.9%	62.4%	62.4%	59.5%	51.4%	63.3%	51.9%	56.1%	57.1%	58.7%	56.3%
Vitamin A 12 - 59 months coverage	49.2%	54.0%	56.1%	53.2%	47.4%	50.5%	50.4%	39.6%	58.8%	50.7%	55.7%	54.1%	53.8%	52.1%
Maternal mortality in facility ratio	62.9	-	-	-	-	-	-	-	-	-	70	70	69.2	69.2
Neonatal death in facility rate	8.5	-	-	-	-	-	-	-	-	-	10	10	9.3	9.3
HPV 1st dose	33 045	-	-	-	-	-	-	-	-	-	41 604	41 604	41604	41604
HPV 2nd dose	36 051	-	-	-	-	-	-	-	-	-	48 855	48 855	48855	48855
<b>Programme 3: Emergency Medical Services</b>														
<b>Emergency Medical Services</b>														
EMS P1 urban response under 15 minutes rate	64.0%	64.0%	44.5%	43.5%	64.0%	45.4%	46.7%	64.0%	49.3%	49.4%	64.0%	50.2%	47.6%	46.8%
EMS P1 rural response under 40 minutes rate	81.0%	81.0%	74.4%	72.9%	81.0%	74.0%	74.7%	81.0%	72.7%	72.7%	81.0%	75.7%	74.4%	73.7%
EMS inter-facility transfer rate	31.9%	31.9%	34.3%	34.2%	31.9%	33.4%	32.6%	31.9%	33.4%	31.8%	31.9%	32.7%	32.5%	32.6%
Total number of EMS emergency cases	501 493	125 373	119 241	118 902	125 373	120 212	120 834	125 373	122 396	124 772	125 374	119 028	120438	484946
Number of WCG: Health operational ambulances registered and licensed	250	-	-	-	-	-	-	-	-	-	250	252	254	254
<b>Programme 4: Provincial Hospital Services</b>														
<b>Dental training hospitals</b>														
Oral health patient visits at dental training hospitals	123 671	34 410	35 430	33 623	35 860	34 694	35 013	23 857	32 348	26 522	29 544	29 456	29456	114795
Number of removable oral health prosthetic devices manufactured (dentists)	4 435	1 185	1 053	1 159	1 499	1 089	1 468	1 354	1 628	1 145	397	333	517	4383
<b>General (regional) Hospital</b>														
Actual (usable) beds in regional hospitals	1 427	-	-	-	-	-	-	-	-	-	1 427	1 427	1 427	1 427
Hospital achieved 75% and more on National Core Standards self assessment rate (regional hospitals)	100.0%	-	-	-	-	-	-	-	-	-	100.0%	100.0%	100%	100%
Average length of stay (regional hospitals)	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4	4	4	4	4

Programme / Sub programme / Performance Measures	Target for 2018/19 as per Annual Performance Plan (APP)	1 <sup>st</sup> Quarter Planned output as per APP	1 <sup>st</sup> Quarter Preliminary output	1 <sup>st</sup> Quarter Actual output - validated	2 <sup>nd</sup> Quarter Planned output as per APP	2 <sup>nd</sup> Quarter Preliminary output	2 <sup>nd</sup> Quarter Actual output - validated	3 <sup>rd</sup> Quarter Planned output as per APP	3 <sup>rd</sup> Quarter Preliminary output	3 <sup>rd</sup> Quarter Actual output - validated	4 <sup>th</sup> Quarter Planned output as per APP	4 <sup>th</sup> Quarter Preliminary output	4 <sup>th</sup> Quarter Actual output - validated	Pre Audited for 2018/19 Actual Performance
Inpatient bed utilisation rate (regional hospitals)	89.1%	89.3%	90.5%	89.5%	89.1%	90.7%	89.6%	89.6%	91.8%	90.0%	88.4%	86.1%	87.8	89.4
Expenditure per PDE (regional hospitals)	R 3 326.00	R 3 080.00	R 2 768.00	R 2 883.00	R 3 326.00	R 3 359.00	R3320	R3198	R3263	3 355	3 780	3 379	R3421	R3239
Complaint resolution within 25 working days rate (regional hospitals)	97.6%	97.3%	98.2%	98.7%	98.7%	100.0%	100.0%	97.2%	100.0%	98.6%	97.3%	100.0%	100%	99.40%
Mortality and morbidity review rate (regional hospitals)	82.4%	82.4%	91.2%	111.8%	82.4%	115.7%	107.8%	82.4%	76.5%	76.5%	82.4%	105.9%	98.0%	101.5%
<b>Psychiatric hospitals</b>														
Actual (usable) beds in psychiatric hospitals	1 850	-	-	-	-	-	-	-	-	-	1 850	1 799	1799	1799
Mortality and morbidity review rate (psychiatric hospitals)	91.7%	91.7%	100.0%	100.0%	100.0%	91.7%	100.0%	83.3%	100.0%	75.0%	91.7%	91.7%	91.7%	87.5%
<b>Rehabilitation hospitals</b>														
Actual (usable) beds in rehabilitation hospitals	156	-	-	-	-	-	-	-	-	-	156	156	156	156
Mortality and morbidity review rate (rehabilitation hospitals)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%	100%
<b>Specialised Hospitals</b>														
Hospitals that achieved an overall performance ≥75% compliance with the national core standard specialised hospitals	81.8%	-	-	-	-	-	-	-	-	-	81.8%	90.9%	90.9%	90.9%
Complaint resolution within 25 working days rate specialised hospitals	94.4%	93.1%	100.0%	100.0%	96.6%	100.0%	98.0%	94.7%	100.0%	100.0%	93.2%	100.0%	96.90%	90.90%
<b>Tuberculosis Hospitals</b>														
Actual (usable) beds in tuberculosis hospitals	1 026	-	-	-	-	-	-	-	-	-	1 026	1 026	1026	1026
Mortality and morbidity review rate (TB hospitals)	83.3%	83.3%	91.7%	91.7%	83.3%	77.8%	100.0%	83.3%	100.0%	94.4%	83.3%	100.0%	100%	99.40%
<b>Programme 5: Central and Tertiary Hospitals</b>														
<b>Central Hospitals</b>														
Actual (usable) beds in central hospitals	2 359	-	-	-	-	-	-	-	-	-	2 359	2 359	2359	2359
Hospitals achieved 75% and more on National Core Standards self-assessment rate (central hospitals)	100.0%	-	-	-	-	-	-	-	-	-	100.0%	-	100%	100%
Average length of stay (central hospitals)	6.3	6.3	6.7	6.5	6.5	6.3	3.9	3.8	3.6	4	4	4	6.5	6.5
Inpatient bed utilisation rate (central hospitals)	85.9%	86.2%	92.2%	91.1%	87.0%	92.0%	81.4%	79.6%	78.6%	74.7%	82.2%	70.0%	88.0%	89.9%
Expenditure per PDE (central hospitals)	R 5 578.00	R 5 578.00	R 4 492.00	R 4 726.00	R 5 409.00	R 5 556.00	R6177	5 578	5 378	7 103	6 769	7 649	R6122	R5506
Complaint resolution within 25 working days rate (central hospitals)	91.7%	92.4%	86.7%	89.6%	91.9%	90.3%	94.4%	92.9%	100.0%	96.0%	90.7%	88.0%	89.6%	89.1%
Mortality and morbidity review rate (central hospitals)	94.0%	95.2%	100.0%	100.0%	95.2%	100.0%	100.0%	66.7%	100.0%	104.8%	95.2%	95.2%	100%	100%
<b>Tertiary Hospital (RCWMCH)</b>														
Actual (usable) beds in RCWMCH	272	-	-	-	-	-	-	-	-	-	272	272	272	272
Hospitals achieved 75% and more on National Core Standards self-assessment rate (RCWMCH)	100.0%	0%	0%	0%	-	-	-	-	-	-	100%	100%	0%	0%
Average length of stay (RCWMCH)	3.9	3.9	3.9	3.9	4.0	3.8	3.9	3.8	3.8	6	6	6	3.7	3.8
Inpatient bed utilisation rate (RCWMCH)	82.0%	82.5%	86.5%	86.0%	83.6%	81.4%	81.4%	79.6%	78.6%	90%	86%	86%	74.6%	78.8%
Expenditure per PDE (RCWMCH)	R 6 499	R 6 499	R 4 873	R 5 487	R 6 249	R 6 209	R 6 177	R 6 499	R 6 522	R 5 642	R 5 758	R 5 809	R8671	R6620
Complaint resolution within 25 working days rate (RCWMCH)	92.0%	90.5%	94.1%	95.5%	92.9%	90.0%	94.4%	92.9%	100.0%	85%	91%	86%	84.4%	92.20%
Mortality and morbidity review rate (RCWMCH)	91.7%	100%	100%	100.0%	100.0%	100.0%	100.0%	66.7%	100.0%	100%	100%	100%	100.0%	100%
<b>Programme 6: Health Science and Training</b>														
<b>Health Science and Training</b>														
Number of bursaries awarded for scarce and critical skills categories	1 875	-	-	-	-	-	-	-	-	-	1 875	1 875	1 875	1 875
Number of bursaries awarded to first year medicine students	50	-	-	-	-	-	-	-	-	-	50	50	50	50
Number of bursaries awarded to first year nursing students	100	-	-	-	-	-	-	-	-	-	101	101	101	101
EMC intake on accredited HPCSA courses	90	-	-	-	-	-	-	-	-	-	90	90	90	90
Intake of home community based carers (HCBCs)	800	-	-	-	-	-	-	-	-	-	800	488	488	803
Intake of data capturer interns	180	-	-	-	-	-	-	-	-	-	180	180	180	180
Intake of learner basic/post basic pharmacist assistants	130	-	-	-	-	-	-	-	-	-	130	99	99	99
Intake of assistant to artisan (ATA) interns	120	-	-	-	-	-	-	-	-	-	120	120	120	120
Intake of HR and finance interns	170	-	-	-	-	-	-	-	-	-	170	167	167	167
Intake of emergency medical care (EMC) assistant interns	110	-	-	-	-	-	-	-	-	-	110	80	80	80
Intake of forensic pathology service (FPS) assistant interns	20	-	-	-	-	-	-	-	-	-	20	20	20	20
<b>Programme 7.1: Health Care Support Services</b>														
<b>Laundry Services</b>														
Average cost per item laundered in-house	R 5.40	R 5.36	R 4.04	R 4.04	R 5.39	R 4.85	R5.15	R5.40	R5.05	5	R5.43	6	R5.56	R4.89
Average cost per item laundered outsourced	R 4.15	R 4.12	R 3.86	R 3.86	R 4.13	R 3.83	R3.84	R4.16	R4.15	4	R4.18	4	R4.18	R4.00
<b>Engineering Services</b>														
Percentage reduction in energy consumption at provincial hospitals (compared to 2014/15 baseline)	10.7%	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	6.0%	6.0%
Percentage of hospitals achieving the provincial benchmark for water utilisation	69.2%	-	-	-	-	-	-	-	-	0.0%	69.2%	76.9%	76.9%	76.90%
Threshold (provincial benchmark) achieved for clinical engineering maintenance jobs completed	Yes	Yes	No	No	Yes	No	Yes	Yes	Yes	Yes	No	Yes	No	No
Threshold (provincial benchmark) achieved for engineering maintenance jobs completed	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Forensic Pathology Services</b>														
Percentage of Child Death Cases Reviewed by the Child Death Review Boards	100.0%	100.0%	64.4%	82.1%	100.0%	49.5%	61.5%	100.0%	41.4%	0.0%	10.7%	8.6%	70.1%	72.80%
<b>Cape Medical Depot</b>														
Percentage of pharmaceutical stock available	95.1%	95.1%	91.3%	91.7%	95.1%	93.1%	92.8%	95.1%	89.9%	89.9%	95.1%	89.4%	89.4%	89.4%
<b>Programme 8: Health Facilities Management</b>														
<b>Health Facilities Management</b>														
Number of health facilities that have undergone major and minor refurbishment in NHI Pilot District (Eden District)	2	-	-	-	-	-	-	-	-	-	-	-	0	0
Number of health facilities that have undergone major and minor refurbishment (excluding facilities in NHI Pilot District (Eden District))	41	-	-	-	-	-	-	-	-	-	9	9	23	23
Percentage of Programme 8 Capital infrastructure budget spent (excluding Maintenance)	100.0%	19.8%	8.4%	8.4%	45.1%	38.9%	33.0%	75.8%	68.5%	66.4%	100.0%	104.6%	104.6%	104.6%
Percentage of Programme 8 Maintenance budget spent	100.0%	16.7%	14.0%	14.0%	36.8%	37.3%	33.9%	61.7%	54.6%	76.9%	100.0%	70.1%	88.20%	88.20%
Percentage of Programme 8 Health Technology budget spent	100.0%	3.9%	1.3%	1.3%	13.0%	12.9%	15.0%	27.2%	31.1%	28.0%	100.0%	115.6%	100%	100%

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