

QUARTERLY PERFORMANCE REPORTS: Financial year - 1st Quarter
Western Cape
Sector: Health

Programme / Sub programme / Performance Measures	Target for 2013/14 as per Annual Performance Plan (APP)	1 st Quarter Planned output as per APP	1 st Quarter Preliminary output
QUARTERLY OUTPUTS			
PROGRAMME 1: ADMINISTRATION			
Percentage expenditure of the annual equitable share budget allocation	100.0%	100.0%	100.0%
Amended Human Resource Plan submitted timeously to DPSA	Yes	No	No
PROGRAMME 2: DISTRICT HEALTH SERVICES			
District Health Services			
PHC utilisation rate	2.54	2.54	2.43
PHC headcount total	15 252 132	3 813 033	3 647 555
PHC utilisation rate – under 5 years	4.03	4.03	3.90
PHC headcount under 5 years total	2 263 406	565 852	548 796
PHC supervisor visit rate (fixed clinic/CHC/CDC)	93.9%	93.9%	76.1%
Provincial PHC expenditure per headcount	R 161	R 161	R 141
Provincial PHC expenditure per uninsured person	R 526	R 526	R 441
Complaints resolution within 25 working days rate (from users of PHC services)	73.3%	73.3%	83.2%
Percentage of PHC facilities assessed for compliance against the 6 priorities of the core standards (NID: Facility core standards self-assessment rate in PHC facilities)	9.6%	0.0%	0.0%
Number of PHC facilities assessed for compliance against the 6 priorities of the core standards	-	-	-
District Hospitals			
Number of usable district hospital beds	2 678	2 678	2 660
Delivery by caesarean section rate (in district hospitals)	24.6%	24.6%	23.4%
Inpatient separations - total (in district hospitals)	264 977	66 244	67 139
Patient day equivalents [PDE] total (in district hospitals)	1 276 052	319 013	326 962
OPD headcount total (in district hospitals)	1 180 584	295 146	318 288
Average length of stay (in district hospitals)	3.2	3.2	3.3
Inpatient bed utilisation rate (based on usable beds in district hospitals)	86.7%	86.7%	91.0%
Expenditure per patient day equivalent [PDE] (in district hospitals)	R 1 451	R 1 451	R 1 185
Complaint resolution within 25 working days rate (from users of district hospitals)	79.2%	79.2%	68.1%
Hospital patient satisfaction rate (in district hospitals)	86.0%	0.0%	0.0%
Percentage of district hospitals assessed for compliance against the 6 priorities of the core standards (NID: Facility core standards selfassessment rate in district hospitals)	100.0%	0.0%	0.0%
Number of hospitals assessed for compliance against the 6 priorities of the core standards (district hospitals)	-	-	-
Mortality and morbidity review rate (in district hospitals)	100.0%	100.0%	121.8%
HIV and AIDS, STI and TB control			
HIV prevalence in women aged 15 - 24 years	11.5%	0.0%	0.0%
Total clients remaining on ART(TROA) at the end of the month	157 123	144 234	133 267
Male condom distribution rate	54.13	54.13	45.03
TB (new pulmonary) defaulter rate	6.5%	6.5%	7.3%
TB AFB sputum result turnaround time under 48 hours rate	72.2%	72.1%	69.8%
HIV testing coverage	28.4%	28.4%	32.2%
Percentage of HIV-TB coinfecting patients placed on ART (NID: Percentage of HIV-TB coinfecting patients initiated on ART initiated)	69.6%	69.6%	64.5%
TB (new pulmonary) cure rate	82.0%	82.0%	82.6%
PTB 2 month smear conversion rate	76.7%	76.7%	72.8%
TB new client treatment success rate	86.6%	86.6%	85.5%

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MCWH&N			
Immunisation coverage under 1 year	90.4%	90.4%	61.6%
Vitamin A coverage 12 – 59 months (OR 1-4 years)	40.6%	40.6%	61.9%
Pneumococcal vaccine (PCV) 3rd dose coverage	90.1%	90.1%	64.4
Rotavirus (RV) 2nd dose coverage	89.6%	89.6%	79.0
Measles 1st dose under 1 year coverage (annualised)	93.1%	93.1%	63.3
Infant 1st tested PCR positive within 2 months rate	1.9%	1.9%	1.8
Child under 5 years diarrhoea with dehydration incidence	79.3	75.5	95.3
Child under 5 years pneumonia incidence	65.8	78.1	75.1
Child under 1 year mortality in facility rate	8.97	0.00	0.00
Inpatient death under 1 year rate	2.5%	0.0%	0.0%
Inpatient death under 5 years rate	1.5%	0.0%	0.0%
Maternal Mortality in facility ratio (MMR)	60.0	0.0	0.0
Cervical cancer screening coverage	64.1%	54.7%	55.8%
Delivery in facility under 18 years	6.5%	6.5%	5.9%
Antenatal 1st visit before 20 weeks rate	61.0%	61.0%	57.1%
Couple year protection rate	42.4%	0.0%	0.0%
Disease Prevention and Control			
Malaria fatality rate (annual)	0.0%	0.0%	0.0%
Cholera fatality rate (annual)	0.0%	0.0%	0.0%
Cataract surgery rate (annual)	1 400	-	-
PROGRAMME 3: EMERGENCY MEDICAL SERVICES			
Emergency Medical Services and Patient Transport			
Rostered ambulances per 10 000 people	0.29	0.29	0.26
EMS operational ambulance coverage per 10 000 people	0.44	-	-
Total number of EMS emergency cases	468 496	117 124	123 531
EMS P1 urban response under 15 minutes rate	75.0%	75.0%	72.7%
EMS P1 rural response under 40 minutes rate	90.0%	90.0%	86.6%
EMS P1call response under 60 minutes rate	97.0%	97.0%	92.2%
EMS all calls response under 60 minutes rate	80.0%	80.0%	68.6%
Percentage of ambulance patients transferred between facilities	21.8%	21.8%	21.5%
PROGRAMME 4: PROVINCIAL HOSPITAL SERVICES			
General (regional) hospitals			
Number of usable beds (in regional hospitals)	1 375	1 375	1 365
Inpatient separations – total (in regional hospitals)	107 943	26 491	28 478
Patient day equivalents [PDE] total (in regional hospitals)	555 272	139 947	142 074
OPD headcount total (in regional hospitals)	242 529	60 633	65 561
Delivery by caesarean section rate (in regional hospitals)	39.6%	39.3%	43.0%
Expenditure per patient day equivalent [PDE](in regional hospitals) [2011/12 Rands]	R 2 117	R 2 117	R 1 801
Bed utilisation rate (based on usable beds in regional hospitals)	84.3%	84.3%	86.1%
Average length of stay (in regional hospitals)	3.9	4.0	3.8
Complaint resolution within 25 working days rate (from users of regional hospitals)	92.20%	92.58%	95.08%
Hospital patient satisfaction rate (in regional hospitals)	80.0%	0.0%	0.0%
Percentage of regional hospitals assessed for compliance against the 6 priorities of the core standards	-	-	-
(NID: Facility core standards self-assessment rate in regional hospitals)	-	-	-
Number of hospitals assessed for compliance against the 6 priorities of the core standards (regional hospitals)	-	-	-
Mortality and morbidity review rate (in regional hospitals)	100.0%	100.0%	103.6%

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Sub-programme 4.2: Tuberculosis Hospitals			
Number of usable beds (in TB hospitals)	1 054	1 054	1 006
Inpatient separations –total (in TB hospitals)	3 896	974	948
Patient day equivalents [PDE] – total (in TB hospitals)	306 325	76 581	66 327
OPD headcount total (in TB hospitals)	5 958	1 490	1 889
Expenditure per patient day equivalent [PDE] total (in TB hospitals) [2011/12 Rands]	R 644	R 644	R 655
Bed utilisation rate (based on usable beds in TB hospitals)	79.3%	79.3%	71.6%
Average length of stay (in TB hospitals)	78.3	78.3	69.3
Complaints resolution within 25 working days rate (from users of TB hospitals)	76.5%	76.5%	88.9%
Hospital patient satisfaction rate (in TB hospitals)	85.6%	0.0%	0.0%
Percentage of TB hospitals assessed for compliance against the 6 priorities of the core standards (NID: Facility core standards self-assessment rate in TB hospitals)	40.0%	0.0%	0.0%
Number of hospitals assessed for compliance against the 6 priorities of the core standards (TB hospitals)	-	-	-
Morbidity and mortality review rate (in TB hospitals)	100.0%	100.0%	150.0%
Psychiatric Hospitals			
Number of usable beds (in psychiatric hospitals)	1 698	1 698	1 698
Inpatient separations – total (in psychiatric hospitals)	6 166	1 569	1 575
Patient day equivalents [PDE] total (in psychiatric hospitals)	560 228	139 461	143 687
OPD total headcount (in psychiatric hospitals)	27 235	6 637	10 427
Expenditure per patient day equivalent [PDE] total (in psychiatric hospitals) [2011/12 Rands]	R 1 090	R 1 090	R 999
Inpatient bed utilisation rate (based on usable beds in psychiatric hospitals)	88.9%	87.3%	90.5%
Average length of stay (in psychiatric hospitals)	89.4	88.3	89.0
Complaint resolution within 25 working days rate (from users of psychiatric hospitals)	87.4%	90.0%	90.5%
Hospital patient satisfaction rate (in psychiatric hospitals)	85.0%	0.0%	0.0%
Percentage of psychiatric hospitals assessed for compliance against the 6 priorities of the core standards	-	-	-
Percentage of psychiatric hospitals assessed for compliance against the 6 priorities of the core standards (NID: Facility core standards self-assessment rate in psychiatric hospitals)	-	-	-
Number of hospitals assessed for compliance against the 6 priorities of the core standards (psychiatric hospitals)	-	-	-
Mortality and morbidity review rate (in psychiatric hospitals)	100.0%	100.0%	120.0%
Number of useable beds (in step-down facilities)	145	145	145
Inpatient bed utilisation rate (in step-down facilities)	82.6%	83.3%	83.5%
Total number of patient days (in step-down facilities)	43 694	11 023	11 046

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Rehabilitation Hospitals			
Number of usable beds (in rehabilitation hospitals)	156	156	156
Inpatient separations –total (in rehabilitation hospitals)	893	236	189
Patient day equivalents [PDE] total (in rehabilitation hospitals)	46 695	11 664	11 935
OPD headcount total (in rehabilitation hospitals)	10 659	2 544	2 918
Expenditure per patient day equivalent [PDE] (in rehabilitation hospitals) [2011/12 Rands]	R 2 233	R 2 233	R 2 003
Inpatient bed utilisation rate (based on usable beds in rehabilitation hospitals)	75.8%	73.8%	77.0%
Average length of stay (in rehabilitation hospitals)	48.3	45.6	58.0
Complaint resolution within 25 working days rate (from users of rehabilitation hospitals)	100.0%	100.0%	100.0%
Hospital patient satisfaction rate (in rehabilitation hospitals)	92.8%	0.0%	0.0%
Percentage of rehabilitation hospitals assessed for compliance against the 6 priorities of the core standards	-	-	-
(NID: Facility core standards self-assessment rate in rehabilitation hospitals)	-	-	-
Number of hospitals assessed for compliance against the 6 priorities of the core standards(rehabilitation hospitals)	-	-	-
Mortality and morbidity review rate (in rehabilitation hospitals)	100.0%	100.0%	150.0%
Dental Training Hospitals			
Number of oral health patient visits per annum	115 100	31 050	33 336
Number of removable oral health prosthetic devices manufactured (dentures)	4 460	1 350	911
PROGRAMME 5: CENTRAL HOSPITAL SERVICES			
Central Hospital Services			
Delivery by Caesarean section rate (in central hospitals)	47.7%	47.7%	47.5%
Number of usable beds (in central hospitals)	2 359	2 359	2 329
Inpatient separations – total (in central hospitals)	121 482	30 371	29 718
OPD headcount - total (in central hospitals)	731 245	182 811	183 008
Patient day equivalents [PDE] total (in central hospitals)	1 004 309	251 077	250 432
Inpatient bed utilisation rate (based on usable beds in central hospitals)	84.7%	84.7%	85.3%
Expenditure per patient day equivalent [PDE] (in central hospitals)	R 3 440	R 3 440	R 3 476
Average length of stay (in central hospitals)	6.0	6.0	6.1
Complaint resolution within 25 working days rate (in central hospitals)	80.0%	80.0%	79.7%
Hospital patient satisfaction rate (in central hospitals)	90.0%	0.0%	0.0%
Percentage of assessments for compliance against the 6 priorities of the core standards (includes external assessment)	100.0%	0.0%	0.0%
(NID: Facility Core standards self-assessment rate in central hospitals)	-	-	-
Number of hospitals assessed for compliance against the 6 priorities of the core standards (Central Hospital)	-	-	-
Mortality and Morbidity review rate (in Central Hospitals)	79%	72%	175%

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Groote Schuur Hospital			
Delivery caesarean section rate (in Groote Schuur Hospital)	56.0%	56.0%	58.6%
Number of usable beds (in Groote Schuur Hospital)	975	975	945
Inpatient separations – total (in Groote Schuur Hospital)	51 602	12 901	12 213
OPD total headcount - total (in Groote Schuur Hospital)	387 014	96 754	95 133
Patient day equivalents [PDE] total (in Groote Schuur Hospital)	451 282	112 821	108 197
Inpatient bed utilisation rate (based on usable beds in Groote Schuur Hospital)	87.0%	87.0%	84.9%
Expenditure per patient day equivalent [PDE] (in Groote Schuur Hospital)	R 3 652	R 3 652	R 3 867
Average length of stay (in Groote Schuur Hospital)	6.0	6.0	6.0
Complaint resolution within 25 working days rate (from users of Groote Schuur Hospital)	80.0%	79.5%	86.9%
Hospital patient satisfaction rate (in Groote Schuur Hospital)	90.0%	0.0%	0.0%
Percentage of assessments for compliance against the 6 priorities of the core standards (includes external assessment)	100.0%	0.0%	0.0%
(NID: Facility Core standards self-assessment rate in central hospitals)	-	-	-
Number of hospitals assessed for compliance against the 6 priorities of the core standards (Groote Schuur Hospital)	-	-	-
Mortality and morbidity review rate (in Groote Schuur Hospital)	83.3%	75.0%	93.8%
Tygerberg Hospital			
Delivery caesarean section rate (in Tygerberg Hospital)	44.0%	44.0%	43.6%
Number of usable beds (in Tygerberg Hospital)	1 384	1 384	1 384
Inpatient separations – total (in Tygerberg Hospital)	69 880	17 470	17 505
OPD total headcount - total (in Tygerberg Hospital)	344 231	86 058	87 875
Patient day equivalents [PDE] total (in Tygerberg Hospital)	553 027	138 257	142 235
Inpatient bed utilisation rate (based on usable beds in Tygerberg Hospital)	83.0%	83.0%	85.6%
Expenditure per patient day equivalent [PDE] (in Tygerberg Hospital)	R 3 267	R 3 267	R 3 179
Average length of stay (in Tygerberg Hospital)	6.0	6.0	6.2
Complaint resolution within 25 working days rate (from users of Tygerberg Hospital)	80.0%	79.4%	73.1%
Hospital patient satisfaction rate (in Tygerberg Hospital)	90.0%	0.0%	0.0%
Percentage of assessments for compliance against the 6 priorities of the core standards (includes external assessment)	100.0%	0.0%	0.0%
(NID: Facility Core standards self-assessment rate in central hospitals)	-	-	-
Number of hospitals assessed for compliance against the 6 priorities of the core standards (Tygerberg Hospital)	-	-	-
Mortality and morbidity review rate (in Tygerberg Hospital)	75.0%	70.0%	240.0%
Red Cross War Memorial Children's Hospital (tertiary)			
Delivery caesarean section rate (in Red Cross War Memorial Children's Hospital [RCWMCH])	Not applicable	Not applicable	-
Number of usable beds (in RCWMCH Hospital)	270	270	271
Inpatient separations – total (in RCWMCH Hospital)	20 191	5 048	5 835
OPD total headcount - total (in RCWMCH Hospital)	121 938	30 485	31 248
Patient day equivalents [PDE] total (in RCWMCH Hospital)	137 074	34 269	35 950
Inpatient bed utilisation rate (based on usable beds in RCWMCH Hospital)	84.0%	84.0%	88.7%
Expenditure per patient day equivalent [PDE] (in RCWMCH Hospital)	R 3 707	R 3 707	R 3 050
Average length of stay (in RCWMCH Hospital)	4.1	4.1	3.8
Complaint resolution within 25 working days rate (from users of RCWMCH Hospital)	80.0%	80.0%	100.0%
Hospital patient satisfaction rate (in RCWMCH Hospital)	90.0%	0.0%	0.0%
Percentage of assessments for compliance against the 6 priorities of the core standards (includes external assessment)	100.0%	0.0%	0.0%
(NID: Facility Core standards self-assessment rate in central hospitals)	-	-	-
Number of hospitals assessed for compliance against the 6 priorities of the core standards (Tygerberg Hospital)	-	-	-
Mortality and morbidity review rate (in RCWMCH Hospital)	90.0%	100.0%	150.0%

Programme / Sub programme / Performance Measures	Target for 2013/14 as per Annual Performance Plan (APP)	1 st Quarter Planned output as per APP	1 st Quarter Preliminary output
PROGRAMME 6: HEALTH SCIENCES AND TRAINING			
Intake of nurse students (1st year at nursing college)	250	250	268
Intake of nurse students (1st to 4th year at HEIs and nursing college)	2 200	2 200	2 243
Basic nurse students graduating (at nursing college)	230	-	-
Basic nurse students graduating (at nursing college and HEIs)	550	-	-
Students with bursaries from the province	2 500	2 500	2 546
EMC intake on accredited HPCSA courses	132	-	-
Intake of Home Community Based Carers (HCBCs)	1 400	-	-
Intake of data-capturer interns	120	120	163
Intake of pharmacy assistants	100	-	-
Intake of Assistant to Artisan (ATA) interns	120	120	127
Intake of HR and finance interns	130	130	130
PROGRAMME 7: HEALTH CARE SUPPORT SERVICES			
Laundry Services			
Average cost per item laundered in-house	R 4.37	R 4.39	R 2.99
Average cost per item laundered outsourced	R 3.03	R 3.03	R 3.09
Engineering Services			
Percentage of engineering emergency cases addressed within 48 hours	90.9%	90.4%	88.9%
Percentage of maintenance budget spent	100.0%	100.0%	71.9%
Percentage of clinical engineering maintenance jobs completed	77.5%	77.5%	78.8%
Percentage of maintenance jobs (excluding clinical engineering jobs) completed	91.0%	91.0%	74.2%
Forensic Pathology Services			
Percentage of FPS cases responded to within 40 minutes	78.0%	78.0%	85.0%
Percentage of cases examined within 3 days	77.0%	77.0%	69.7%
Percentage of FPS cases released within 5 days (excluding unidentified persons)	80.0%	80.0%	73.7%
Cape Medical Depot			
Percentage of pharmaceutical stock available	97%	97%	92%
PROGRAMME 8: HEALTH FACILITIES MANAGEMENT			
Health Facilities Management			
Percentage of preventive maintenance (Equitable Share) budget spent	100.0%	100.0%	0.0%
Percentage of scheduled maintenance (Equitable Share) budget spent	100.0%	100.0%	184.1%
Percentage of health infrastructure component budget spent	100.0%	100.0%	102.5%
Percentage of hospital revitalisation component budget spent	100.0%	100.0%	64.4%
Percentage of Equitable Share capital budget spent	100.0%	100.0%	124.8%
Percentage of Health Technology budget spent	100.0%	100.0%	49.3%
Percentage of strategic briefs completed	100.0%	0.0%	0.0%
Percentage of capital projects completed	100.0%	100.0%	200.0%

Information submitted by: **PROF K HOUSEHAM**

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