IDEAL CLINIC SOUTH AFRICA

Monthly Provincial Report on PHC facilities identified to be Ideal in 2016/17

Mpumalanga

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1. Introduction

The Ideal Clinic programme is an initiative that was started by South Africa in July 2013 as a way of systematically improving the deficiencies in public Primary Health Care (PHC) facilities as well as to improve the quality of care provided.

The National Health Council gave a directive on 24 April 2015 that all PHC facilities must be Ideal within the next three years beginning in the 2015/16 financial year. Provinces have submitted their two year scale-up plans for the remaining two years. All facilities in the National Health Insurance (NHI) districts must be Ideal by 31 March 2017. Therefore those facilities in NHI districts that have not reached Ideal Clinic status in the 2015/16 financial year must be included for scale-up in 2016/17. The focus for improvement is placed on facilities identified to reach Ideal Clinic status in this financial year. Therefore this report focuses only on the progress and outcome of PHC facilities identified to **be Ideal in 2016/17**.

2. National overview

2.1 National overview of progress made with conducting status determination

A total of 1359 (98%) out of 1384 facilities have conducted and captured their Status Determinations (SD). The submission of data on SD range from 94% (Limpopo) to 100% (Northern Cape), see *Figure 1*. Note that one facility in Free State in T Mofutsanyane district and one facility in Mpumalanga in Gert Sibande district did not conduct a status determination as the facilities are currently closed. Lesedi clinic in T Mofutsanyane district has been vandalised and Ethandakukhanya clinic in Gert Sibande district has been burnt down. The SDs will be conducted once these facilities have re-opened.

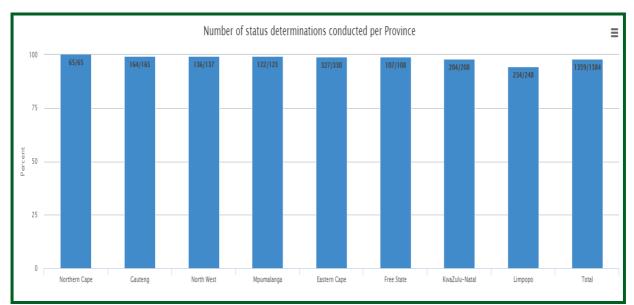


Figure 1: Data submission nationally

2.2 National overview of outcome of status determination

2.2.1 Average percentage scored per province

The average score obtained per province range from 56% (Free State) to 69% obtained by Gauteng *(Figure 2).* The average score obtained nationally is 61% rendering KwaZulu-Natal, Limpopo, Eastern Cape, Mpumalanga and Free State perform below the national average.

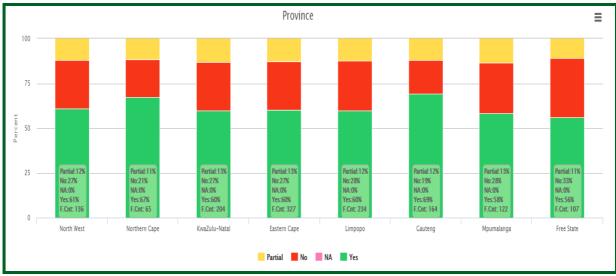


Figure 2: Average score per province

2.2.2 Overall facility performance according to categories of Ideal Clinic

In order for a facility to obtain an Ideal Clinic (IC) status the facility must attain a minimum score of 100% for elements weighted as Vital, 75% for elements weighted as Essential and 60% for elements weighted as Important Elements.

Nationally, 6 out of the 8 provinces have facilities that obtained Ideal Clinic status. Of the 1359 facilities that conducted a SD, 32 facilities (2.4%) obtained an IC category status of which 15 facilities obtained silver (47%), 16 facilities obtained gold (50%), 1 facility obtained platinum (3%) and 0 facility for diamond status (0%) (*Figures 3 and 4*).

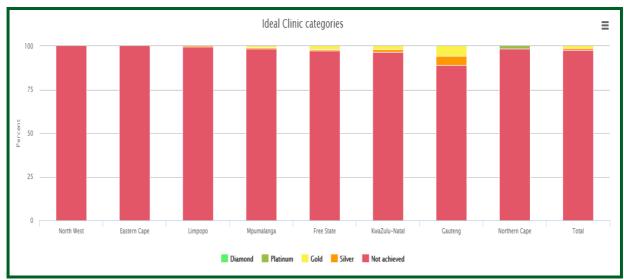


Figure 3: Percentage of facilities that obtained an Ideal Clinic category nationally

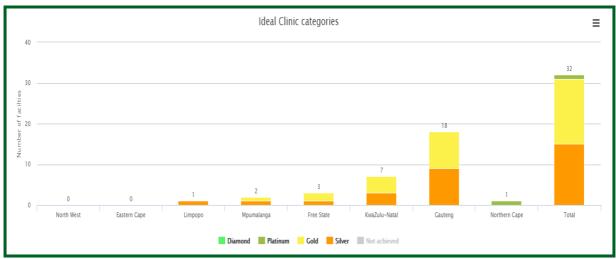


Figure 4: Number of facilities that obtained an Ideal Clinic category nationally

2.2.3 Percentage of Vital elements failed

Facilities should focus on elements that are weighted as Vital that were failed as an Ideal Clinic status can only be obtained if none of the elements that are weighted as Vital were failed.

The percentages as set out in Table 1 indicate the percentage of facilities that failed the specific element, it is not the average obtained for the element. Nationally, the element which has the highest failure rate is the element that measures whether the emergency trolley was restored daily or after every time it was used (94%) followed by the element which measures whether the resuscitation room is equipped with functional basic equipment for resuscitation (92%). The element with the minimal failure rate across the country is the one that measures whether sharps are disposed of in impenetrable, tamperproof containers (1%).

Ideal Clinic Dashboard Reference	Responsibility	Percentage
Restore the emergency trolley daily or after every time it was		
used	Facility	94%
Resuscitation room is equipped with functional basic		
equipment for resuscitation	Facility	92%
There is a sterile emergency delivery pack	Facility	70%
Required functional diagnostic equipment and concurrent consumables for point of care testing are available	Facility	64%
90% of the tracer medicines are available	Facility	30%
There is constant supply of clean, running water to the facility	Facility	16%
There is at least one functional wall mounted room		
thermometer in the medicine room/dispensary	Facility	16%
The temperature of the medicine room/dispensary is recorded		
daily	Facility	15%
The temperature of the medicine room/dispensary is		
maintained within the safety range	Facility	13%
Oxygen cylinder with pressure gauges available in		
resuscitation/emergency room	Facility	9%
The temperature of the medicine refrigerator is maintained		
within the safety range	Facility	4%
The temperature of the medicine refrigerator is recorded twice		
daily	Facility	4%
Sharps containers are disposed of when they reach the limit		
mark	Facility	2%
There is a thermometer in the medicine refrigerator	Facility	2%
Sharps are disposed of in impenetrable, tamperproof		
containers	Facility	1%

 Table 1: National percentage of vital elements failed

2.2.4 Best and lowest performing districts

The best performing district nationally is Zwelentlanga Fatman Mgcawu District in Northern Cape that scored 84% while the lowest performing district is Mopani District in Limpopo which scored 34% (*Figures 5 and 6*).

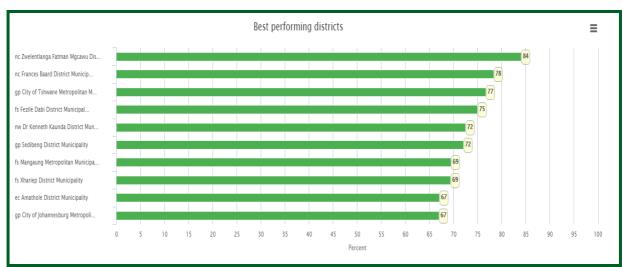


Figure 5: Best performing district nationally

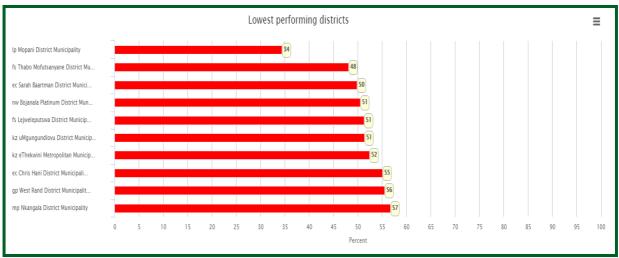


Figure 6: Lowest performing district nationally

2.2.5 Best and lowest performing facilities

The best performing facilities nationally are Hopetown Clinic in Northern Cape and Mjejane Clinic in Mpumalanga which each scored 95%; while the lowest performing facility is Umlazi D. Clinic in KwaZulu-Natal that scored 17% (*Figures 7 and 8*).

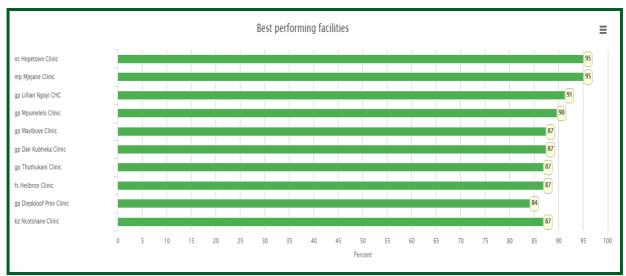


Figure 7: Best performing facilities nationally

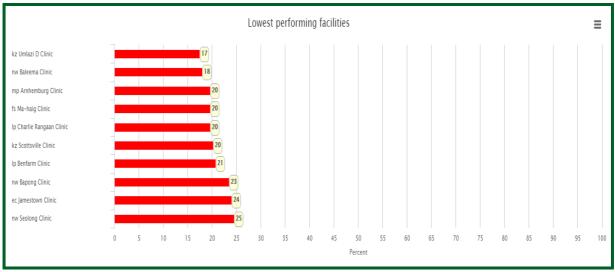


Figure 8: Lowest performing facilities nationally

2.2.6 Performance per component

Nationally facilities performed the best in the Health Information Management (81%) component followed by the Human Resources for Health component with an average score of 69%. The component that scored the lowest is the Implementing Partners and Stakeholders component that scored only 32% (*Figure 9*).

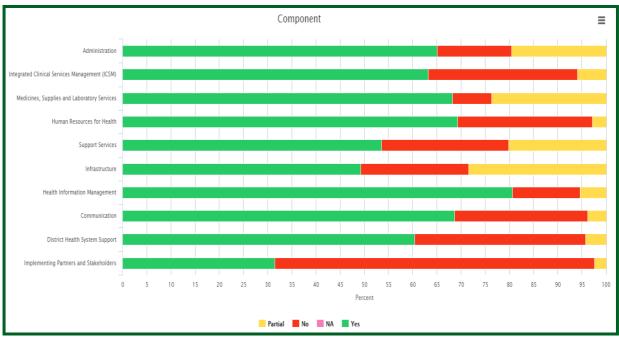


Figure 9: Performance per component nationally

2.2.7 Distribution of the overall scores of facilities

A total of 1 359 status determinations were conducted. The distribution of the overall scores obtained by the facilities is as follows:

- 122 facilities scored 80% and more,
- 259 facilities scored between 70% to 79%,
- 382 facilities scored between 60% to 69%,
- 510 facilities scored between 40% to 59% and
- 86 facilities scored less than 40%, see *Figure 10* below.

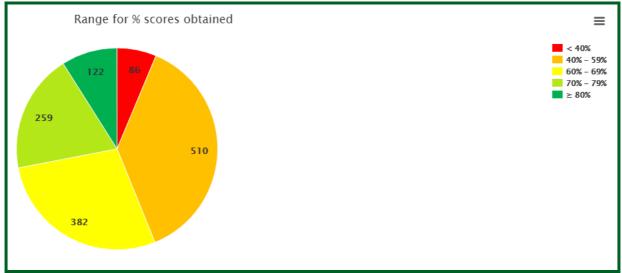


Figure 10: National distribution of the overall scores of facilities

3 Provincial and district overview

3.1 Provincial and district overview on progress made with conducting status determination

The average submission for SD data for the province is 99%; total of 122 out of 123 facilities have conducted their SD *(Figure 11)* the district scores range from 98% (Gert Sibande DM) to 100% (Ehlanzeni and Nkangala DM). The one facility in Gert Sibande, Ethandakukhanya, did not conduct a SD submission as it is burnt down and still in the process of being rebuild.

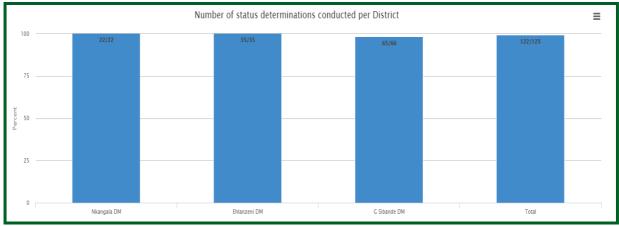


Figure 11: Data submission per district

3.2 Provincial and district overview of outcome of status determination

3.2.1 Average percentage scored per district

The average score obtained per district ranged from 55% (Nkangala) to 58% (Ehlanzeni and G Sibande DM) (*Figure 12*). The number of SD conducted in section 3.1 must be considered when evaluating the average score as not all the districts have submitted all data on SD.

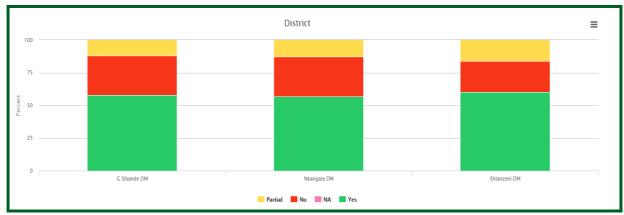


Figure 12: Average score per district

3.2.2 Overall facility performance according to categories of Ideal Clinic

The percentage and number of facilities per district that achieved Ideal Clinic status is set out in Figures 13 and 14. Apart from Nkangala DM, the other two districts in the province had facilities that obtained the IC categories i.e. 2 facilities scored silver and gold, none obtained platinum or diamond status.

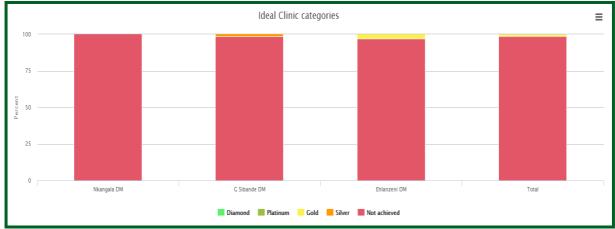


Figure 13: Percentage of facilities that obtained an Ideal Clinic category provincially

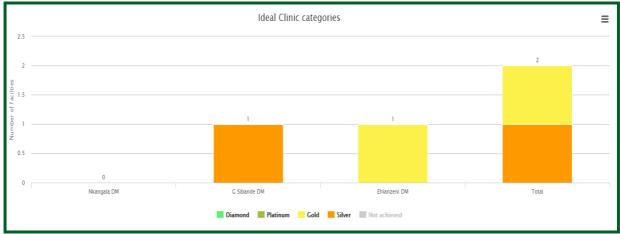


Figure 14: Number of facilities that obtained an Ideal Clinic category provincially

3.2.3 Percentage of Vital elements failed

Facilities should focus on elements that are weighted as Vital that were failed as an Ideal Clinic status can only be obtained if none of the elements that are weighted as Vital were failed.

The percentages as set out in Table 2 indicate the percentage of facilities that failed the specific element, it is not the average obtained for the element. The elements which have the highest failure rate are the elements that measure whether the resuscitation room is well equipped with functional basic equipment for resuscitation and the element that measures whether restoration of the emergency trolley daily or after every time it was used is done (93%). The element with the least failure rate was recorded for the element as shown in Table 2 with a score of 1%.

Ideal Clinic Dashboard Reference	Responsibility	Percentage
Resuscitation room is equipped with functional basic		
equipment for resuscitation	Facility	93%
Restore the emergency trolley daily or after every time it was		
used	Facility	93%
Required functional diagnostic equipment and concurrent		5 / 6 /
consumables for point of care testing are available	Facility	61%
There is a sterile emergency delivery pack	Facility	61%
90% of the tracer medicines are available	Facility	27%
The temperature of the medicine room/dispensary is		
recorded daily	Facility	24%
The temperature of the medicine room/dispensary is		
maintained within the safety range	Facility	24%
There is at least one functional wall mounted room		
thermometer in the medicine room/dispensary	Facility	19%
There is constant supply of clean, running water to the facility	Facility	19%
Oxygen cylinder with pressure gauges available in		
resuscitation/emergency room	Facility	16%
The temperature of the medicine refrigerator is recorded		
twice daily	Facility	6%
The temperature of the medicine refrigerator is maintained		
within the safety range	Facility	3%
Sharps containers are disposed of when they reach the limit		
mark	Facility	2%
Sharps are disposed of in impenetrable, tamperproof		
containers	Facility	2%
There is a thermometer in the medicine refrigerator	Facility	1%

Table 2: Provincial percentage of vital elements failed

3.2.4 Best and lowest performing facilities

The best performing facility is Mjejane Clinic at 95% and with gold (*Figure 15*). The lowest performing facility is Amhemburg Clinic that scored 20% (*Figure 16*).



Figure 15: Best performing facilities in the province

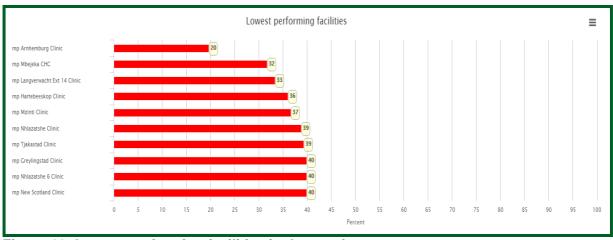


Figure 16: Lowest performing facilities in the province

3.2.5 Performance per component

The province performed the best in the Health Information Management (74.5%) followed by the Communications component (70%) while the lowest is the Implementing Partners and Stakeholders component that scored only 18% (*Figure 17*).

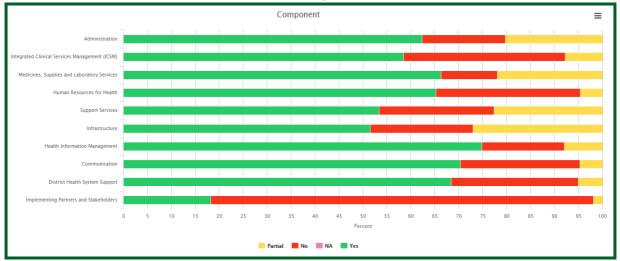
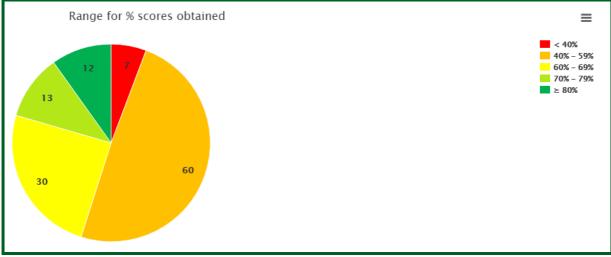


Figure 17: Performance per component for the province

3.2.6 Distribution of the overall scores of facilities

A total of 122 status determinations were conducted. The distribution of the overall scores obtained by the facilities is follow:

- o 12 facilities scored 80% and more,
- o 13 facilities scored between 70% to 79%,
- o 30 facilities scored between 60% to 69%,
- o 60 facilities scored between 40% to 59% and
- o 7 facilities scored less than 40%, see *Figure 18* below.



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Figure 18: Provincial distribution of the overall scores of facilities

3.2.7 Scores per facility

Table 3 below displays the scores obtained per facility according to performance. The percentage score per facility ranges from 20% (Arnhemburg) to 95% (Mjejane); 6 facilities did not conduct SD submission.

District	Facility Name	% Score	Current Category
G Sibande DM	Arnhemburg	20	Not achieved
G Sibande DM	Mbejeka CHC	32	Not achieved
G Sibande DM	Langverwacht Ext 14	33	Not achieved
G Sibande DM	Hartebeeskop	36	Not achieved
Ehlanzeni DM	Mzinti	37	Not achieved
G Sibande DM	Nhlazatshe	39	Not achieved
G Sibande DM	Tjakastad	39	Not achieved
G Sibande DM	Nhlazatshe 6	40	Not achieved
G Sibande DM	Greylingstad	40	Not achieved
G Sibande DM	New Scotland	40	Not achieved
Ehlanzeni DM	Elandsfontein	41	Not achieved
G Sibande DM	Driefontein CHC	41	Not achieved
G Sibande DM	Balfour Clinic	42	Not achieved
G Sibande DM	Dirkiesdorp	42	Not achieved
Nkangala DM	Moloto CHC	42	Not achieved
Ehlanzeni DM	Calcutta	43	Not achieved
Ehlanzeni DM	Mananga Clinic	43	Not achieved
Ehlanzeni DM	Ntunda Clinic	43	Not achieved
Nkangala DM	Mmametlhake CHC	43	Not achieved
Ehlanzeni DM	Arthurstone	44	Not achieved
G Sibande DM	Langverwacht	44	Not achieved
G Sibande DM	Derby	44	Not achieved
G Sibande DM	Davel	44	Not achieved
Ehlanzeni DM	Thulamahashe CHC	45	Not achieved
Ehlanzeni DM	Hluvukani	46	Not achieved
G Sibande DM	Vlakplaas	46	Not achieved
G Sibande DM	KwaNgema CHC	46	Not achieved
Nkangala DM	Middelburg Ext 8	47	Not achieved
Nkangala DM	Sr Mashiteng Clinic	47	Not achieved
G Sibande DM	Kromdraai	48	Not achieved
Nkangala DM	Eastdene	48	Not achieved
G Sibande DM	Siyathemba CHC	49	Not achieved
G Sibande DM	Driefontein Clinic	49	Not achieved
Nkangala DM	Siyabuswa	49	Not achieved

Nkangala DM	Klarinet Clinic	49	Not achieved
Ehlanzeni DM	Agincourt CHC	50	Not achieved
G Sibande DM	Kinross/Thistle Grov	50	Not achieved
G Sibande DM	Trichardt Clinic	50	Not achieved
G Sibande DM	Stanwest/Azalia	50	Not achieved
G Sibande DM	Mkhondo Town Clinic	50	Not achieved
Nkangala DM	Simunye	50	Not achieved
Nkangala DM	Gemsbokspruit	50	Not achieved
Ehlanzeni DM	Maviljan	51	Not achieved
Ehlanzeni DM	Shabalala	51	Not achieved
Nkangala DM	Empumelelweni CHC	51	Not achieved
G Sibande DM	Eerstehoek Clinic	52	Not achieved
G Sibande DM	Piet Retief Clinic	52	Not achieved
G Sibande DM	Thussiville	52	Not achieved
Nkangala DM	Middelburg Ext 6	52	Not achieved
Ehlanzeni DM	Islington Clinic	54	Not achieved
Ehlanzeni DM	Shatale	54	Not achieved
Ehlanzeni DM	Louw's Creek	54	Not achieved
G Sibande DM	Entombe	54	Not achieved
G Sibande DM	Singobile Clinic	54	Not achieved
		•	
Nkangala DM	Marapyane CHC	54	Not achieved
Ehlanzeni DM	Arthurseat	55	Not achieved
Ehlanzeni DM	Nkwalini	55	Not achieved
G Sibande DM	Amsterdam CHC	55	Not achieved
Ehlanzeni DM	Utah Clinic	56	Not achieved
Nkangala DM	Lefiso	56	Not achieved
G Sibande DM	Bethal Town Clinic	57	Not achieved
Nkangala DM	Tweefontein G	57	Not achieved
Ehlanzeni DM	Sandrivier	58	Not achieved
G Sibande DM	Kwazanele	58	Not achieved
G Sibande DM	Warburton CHC	58	Not achieved
G Sibande DM	Paulina M CHC	59	Not achieved
G Sibande DM	Sead	59	Not achieved
G Sibande DM	Emthonjeni Clinic (Msuka)	60	Not achieved
Nkangala DM	Beatty	60	Not achieved
Ehlanzeni DM	Zoeknog	61	Not achieved
Ehlanzeni DM	Kabokweni CHC	61	Not achieved
G Sibande DM	Sakhile	61	Not achieved
G Sibande DM	Badplaas CHC	62	Not achieved
G Sibande DM	Mooiplaas	62	Not achieved
G Sibande DM	Evander Clinic	62	Not achieved
Nkangala DM	Botleng Ext 3	62	Not achieved
Ehlanzeni DM	Matsulu CHC	63	Not achieved
G Sibande DM	Dundonald CHC	63	Not achieved

G Sibande DM	Ermelo Clinic	63	Not achieved
G Sibande DM	Lothair Clinic	63	Not achieved
G Sibande DM	Vukuzakhe	64	Not achieved
Nkangala DM	Wonderfontein	64	Not achieved
Nkangala DM	Thembalethu CHC	64	Not achieved
Ehlanzeni DM	Dwaleni	65	Not achieved
Ehlanzeni DM	Mbonisweni	65	Not achieved
Ehlanzeni DM	Sabie Clinic	66	Not achieved
G Sibande DM	Amersfoort	66	Not achieved
Ehlanzeni DM	Bourkes Luck	67	Not achieved
G Sibande DM	Betty'sgoed	67	Not achieved
G Sibande DM	Lebohang CHC	67	Not achieved
G Sibande DM	Ezamokuhle	67	Not achieved
Ehlanzeni DM	Naas	68	Not achieved
G Sibande DM	Emzinoni	68	Not achieved
G Sibande DM	Secunda Clinic	68	Not achieved
	Seabe CHC	68	Not achieved
Nkangala DM Ehlanzeni DM		69	Not achieved
	Glenthorpe		Not achieved
Nkangala DM	Siphosesimbi	69	
Ehlanzeni DM	Dwarsloop CHC	70	Not achieved
G Sibande DM	Lochiel CHC	70	Not achieved
G Sibande DM	Chrissiesmeer	71	Not achieved
G Sibande DM	Glenmore	72	Not achieved
G Sibande DM	W Maboa CHC	72	Not achieved
Ehlanzeni DM	Bhuga CHC	73	Not achieved
G Sibande DM	Fernie 2	73	Not achieved
G Sibande DM	Mispel Street	74	Not achieved
G Sibande DM	Morgenzon	75	Not achieved
G Sibande DM	Embalenhle CHC	77	Not achieved
G Sibande DM	MS Msimanga	77	Silver
Ehlanzeni DM	Mashishing	79	Not achieved
Ehlanzeni DM	M'Africa CHC	79	Not achieved
Ehlanzeni DM	Masibekela	80	Not achieved
Ehlanzeni DM	Cathyville	80	Not achieved
Nkangala DM	Middelburg Civic	81	Not achieved
G Sibande DM	Silobela	82	Not achieved
G Sibande DM	Carolina Clinic	83	Not achieved
Nkangala DM	Greenside CHC	85	Not achieved
Ehlanzeni DM	Buffelspruit CHC	86	Not achieved
G Sibande DM	Swallowsnest	86	Not achieved
G Sibande DM	Diepdale	89	Not achieved
G Sibande DM	Mayflower CHC	91	Not achieved
G Sibande DM	Fernie 1	92	Not achieved
Ehlanzeni DM	Mjejane clinic	95	Gold
G Sibande DM	Ethandakukhanya		

Table 3: Scores per facilities

4. Conclusion

The average submission for SD data for the province is 99%; total of 122 facilities have conducted their SD (*Figure 11*) the district scores range from 98% (Gert Sibande DM) to 100% (Ehlanzeni and Nkangala DM). One facility in Gert Sibande DM did not conduct the SD submission as it was burn down.

The province performed the best in the Health Information Management (74.5%) followed by the Communications component (70%) while the lowest is the Implementing Partners and Stakeholders component that scored only 18% (Figure 17).

The province should strive to improve the scores obtained in the vital elements-especially those with the highest failure rate. The elements which have the highest failure rate are the two elements that measure whether the resuscitation room is well equipped with functional basic equipment for resuscitation and whether the restoration of the emergency trolley daily or after every time it was used is done (93%).

Mjejane clinic (95%) performed the best while Arnhemburg performed the lowest (20%). Two facilities scored silver and gold, none obtained platinum or diamond status.

The Technical Committee of the National Health Council gave a directive in July 2016 that district scale-up teams for the next two months do nothing but zoom in on clinics scoring 59% and less. The province has 67 facilities that scored 59% and less. See figure 18 and table 3 for a list of the facilities that scores 59% and less.

* Western Cape is still going to submit their scale-up plans. Once it is submitted their data will be available.