

IDEAL CLINIC SOUTH AFRICA

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

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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.

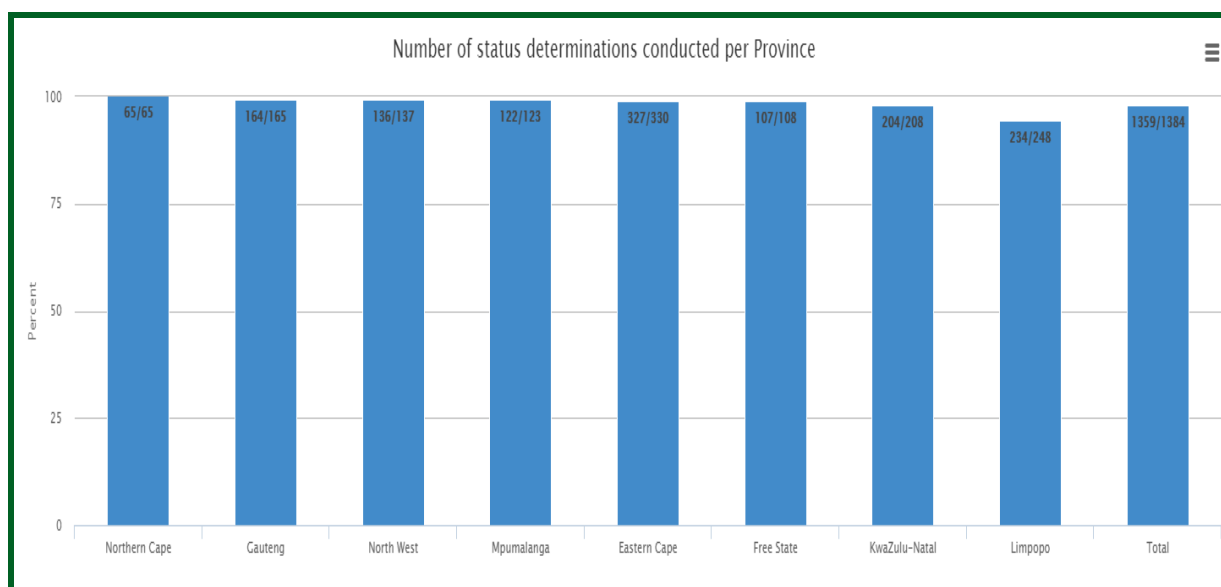


Figure 1: Data submission nationally

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.

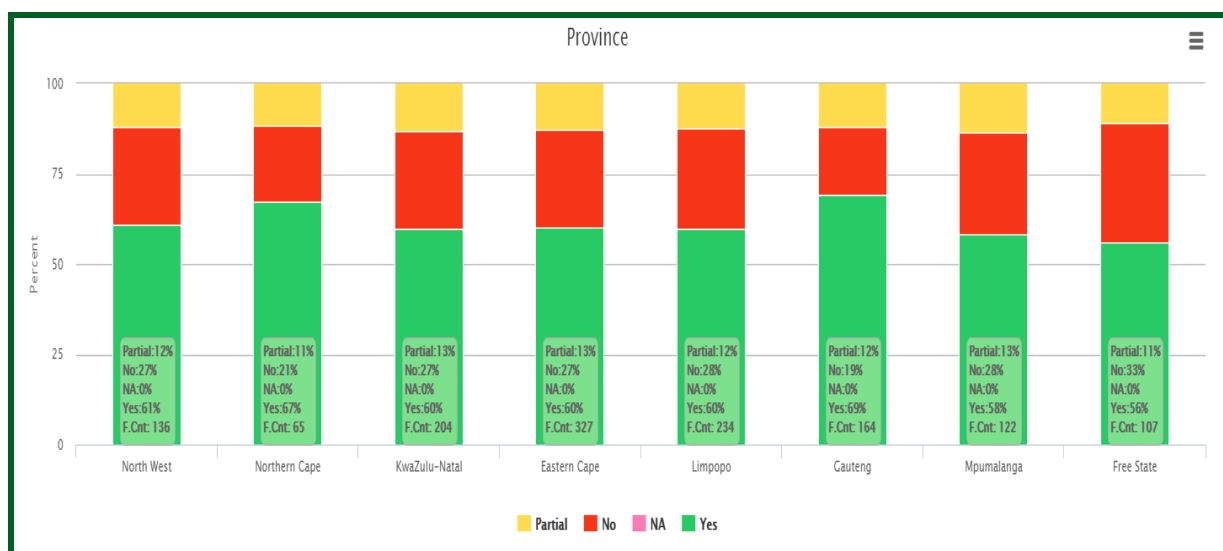


Figure 2: Average score per province

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).

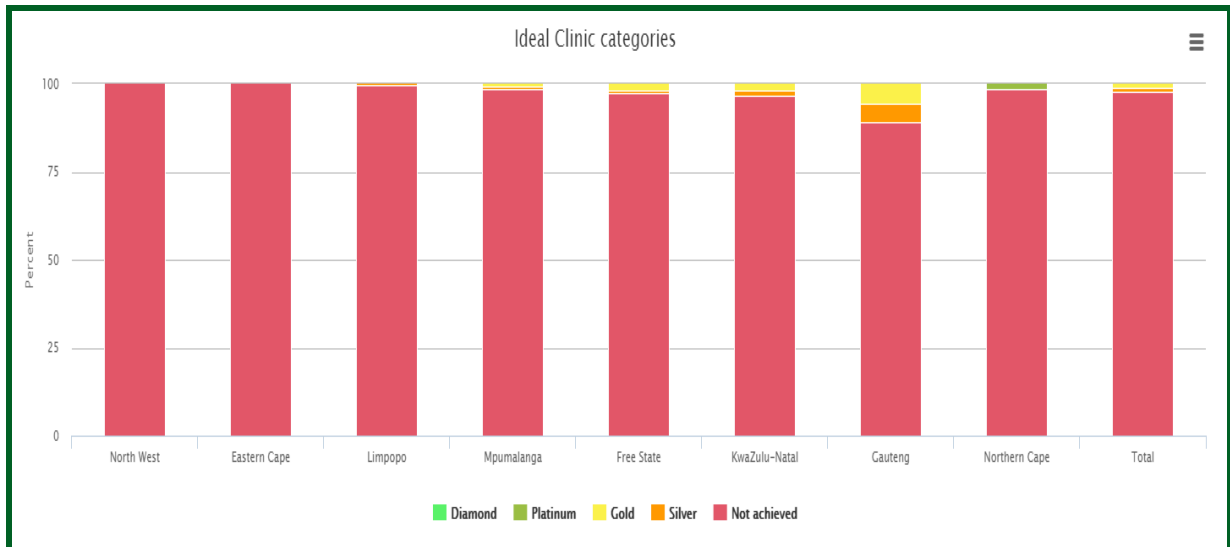


Figure 3: Percentage of facilities that obtained an Ideal Clinic category nationally

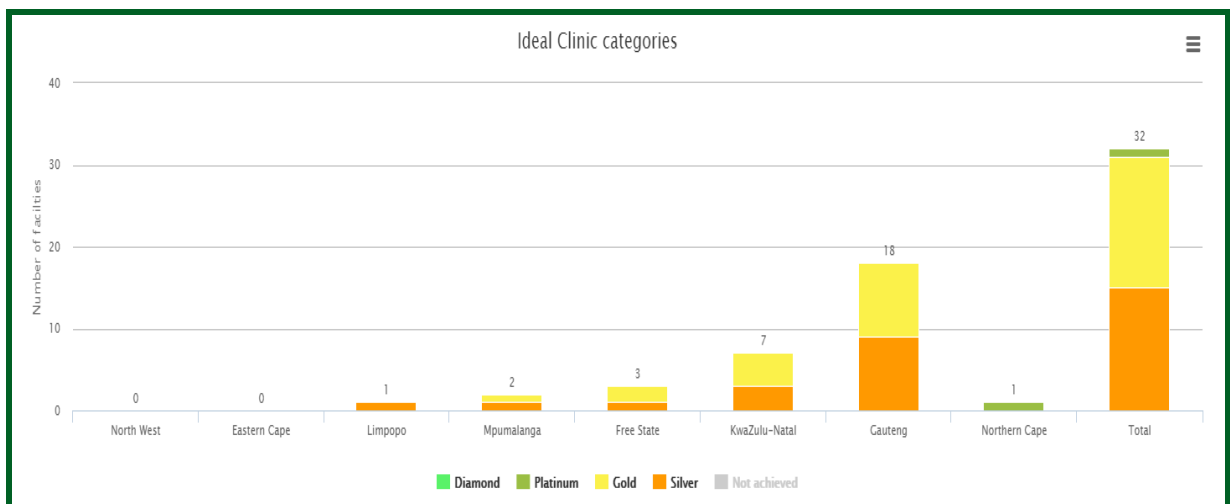


Figure 4: Number of facilities that obtained an Ideal Clinic category nationally

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).

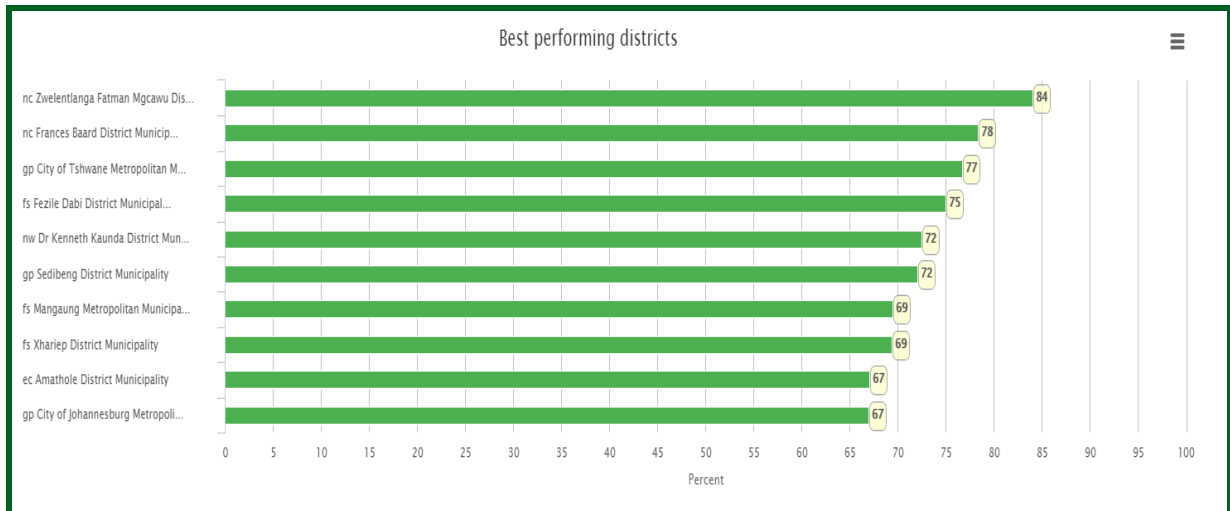


Figure 5: Best performing district nationally

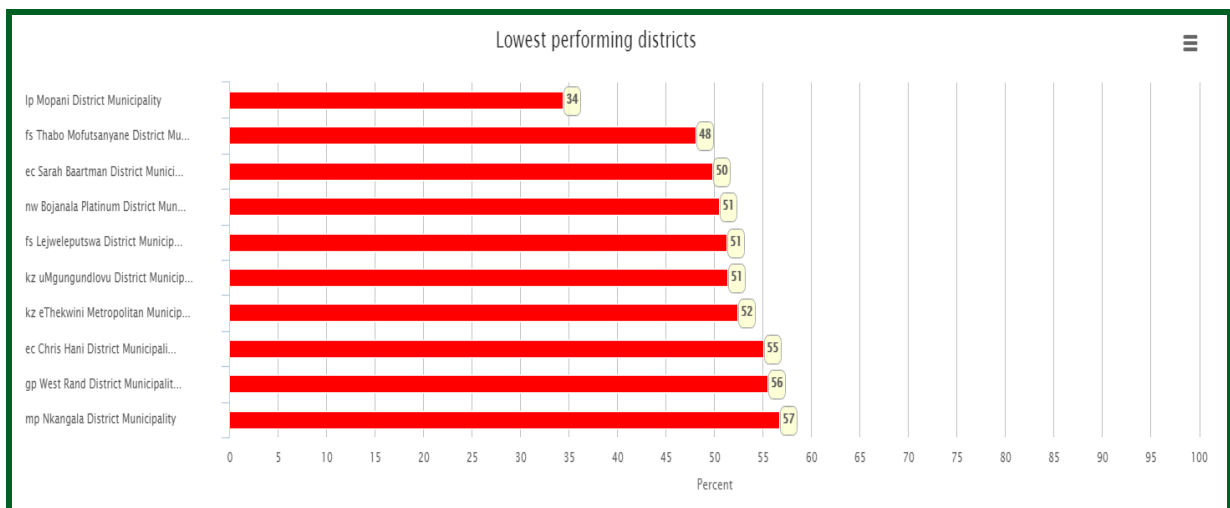


Figure 6: Lowest performing district nationally

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).

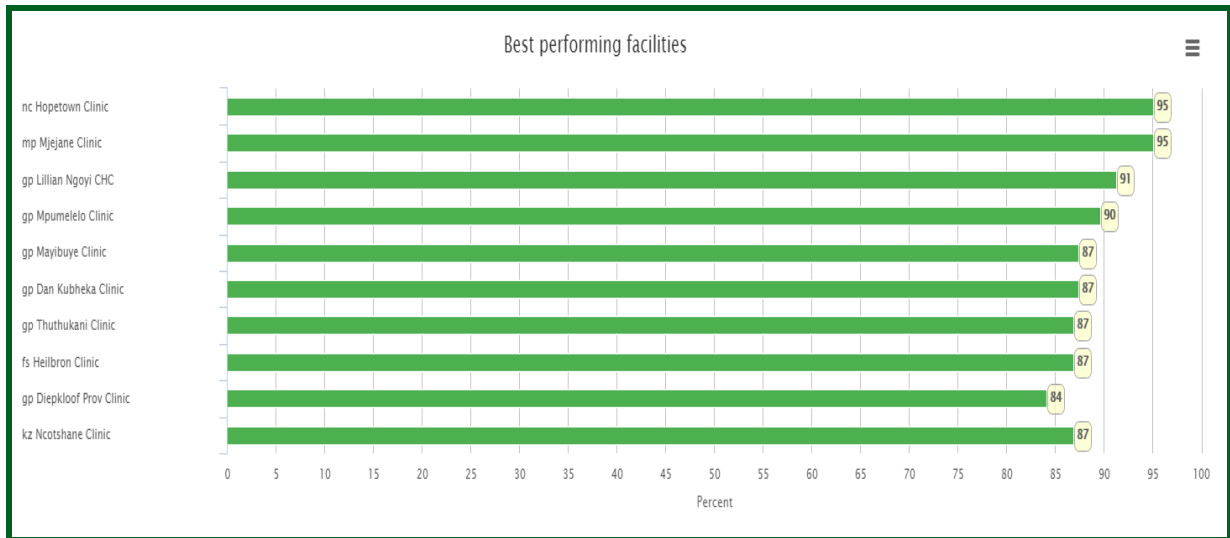


Figure 7: Best performing facilities nationally

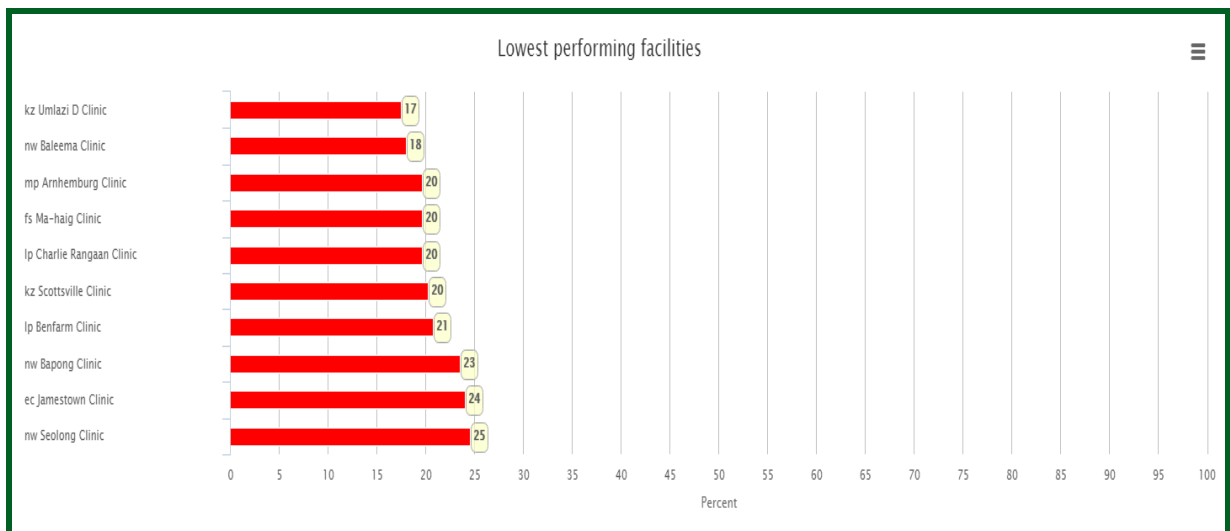


Figure 8: Lowest performing facilities nationally

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).

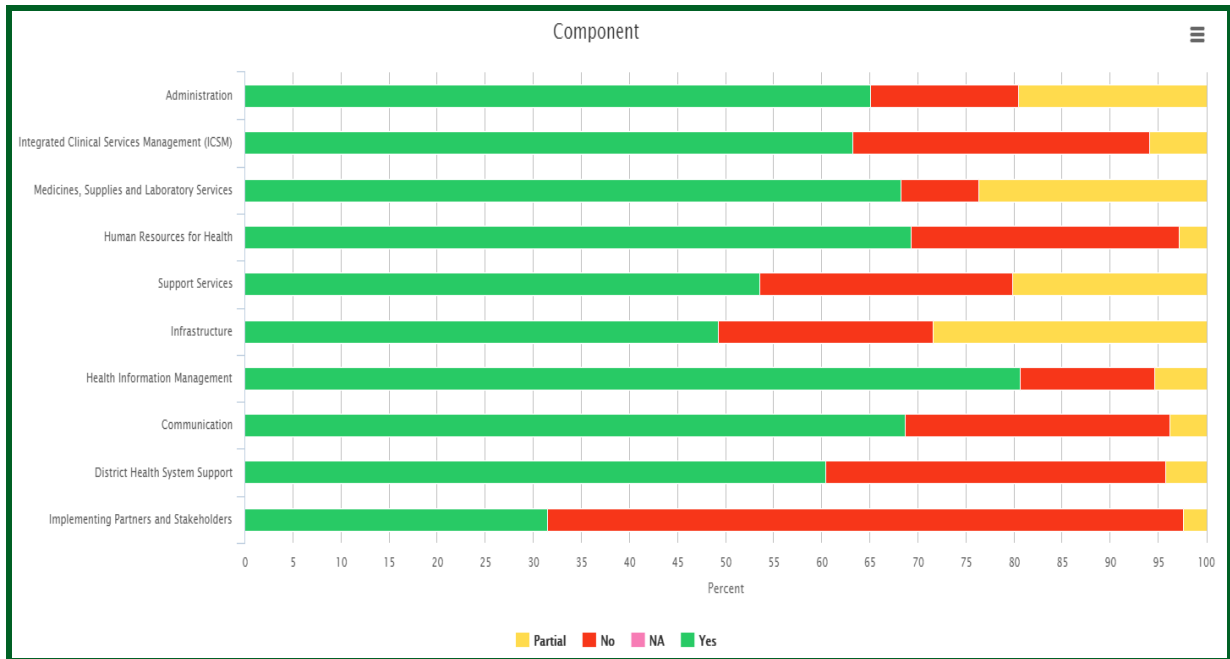


Figure 9: Performance per component nationally

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.

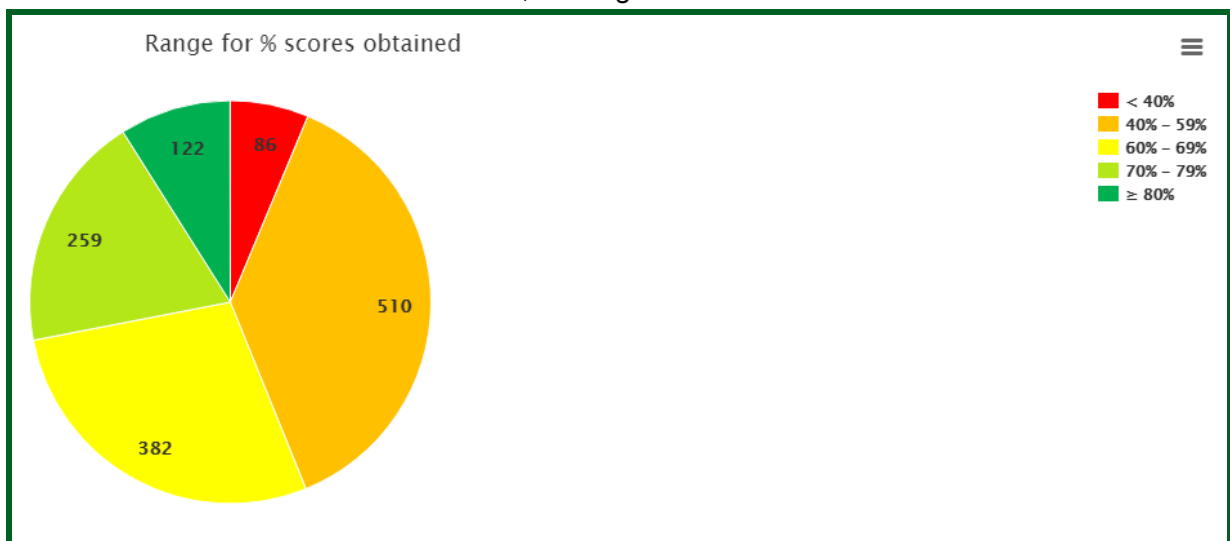


Figure 10: National distribution of the overall scores of facilities

3 Provincial and district overview

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

The SD submission in Free State ranged from 98% (T. Mofutsanyane) to 100% in the rest of the districts. A total of 107 out of 108 (99%) facilities submitted SD submission (*Figure 11*). As mentioned in section 2.1 the one facility that does not have a status determination is Lesedi clinic which is a facility in a NHI district which in temporality closed due to vandalism. The SD will be conducted once it is re-opened.

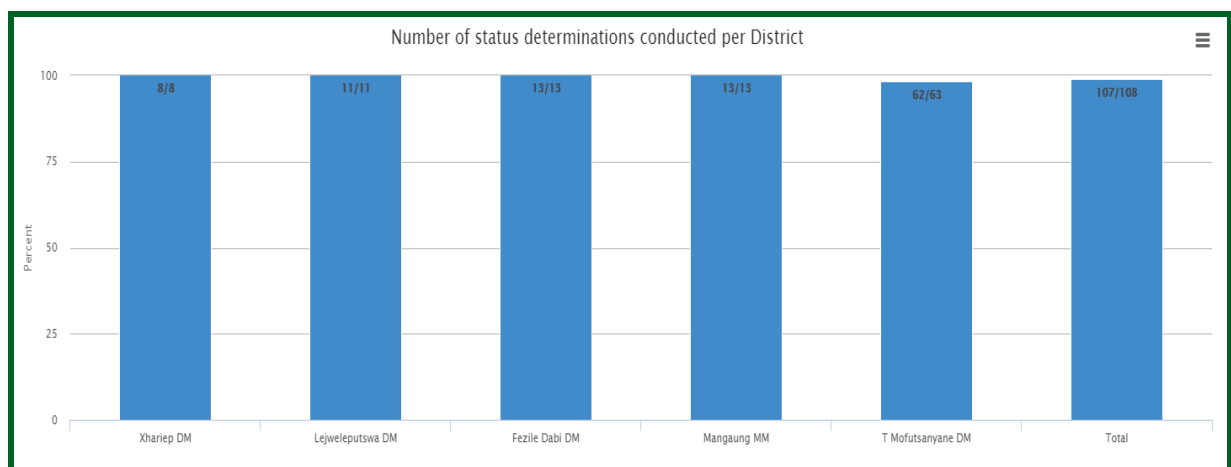


Figure 11: Data submission per district

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 range from 48% (T. Mofutsanyane) to 75% (Fezile Dabi) (*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.

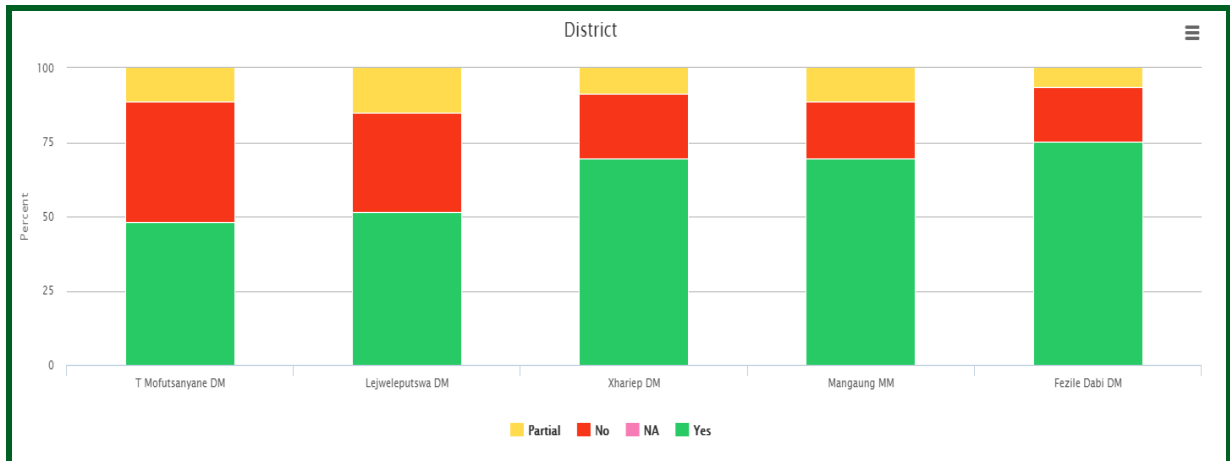


Figure 12: Average score per district

3.2.2 Overall facility performance according to categories of Ideal Clinic

The percentage of facilities per district that achieved Ideal Clinic status is set out in Figure 13.

All the districts in the province did not record any facility with an Ideal Clinic except for Fezile Dabi DM where facilities scored either silver (1 facility) or gold (2 facilities) (Figures 13 and 14).

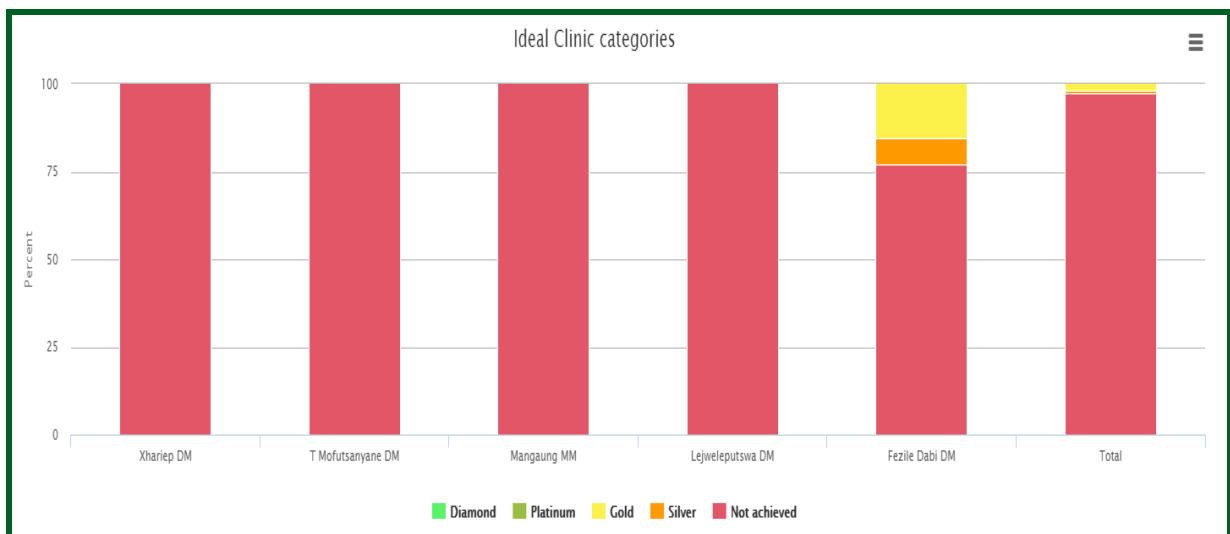


Figure 13: Percentage of facilities that obtained an Ideal Clinic category provincially

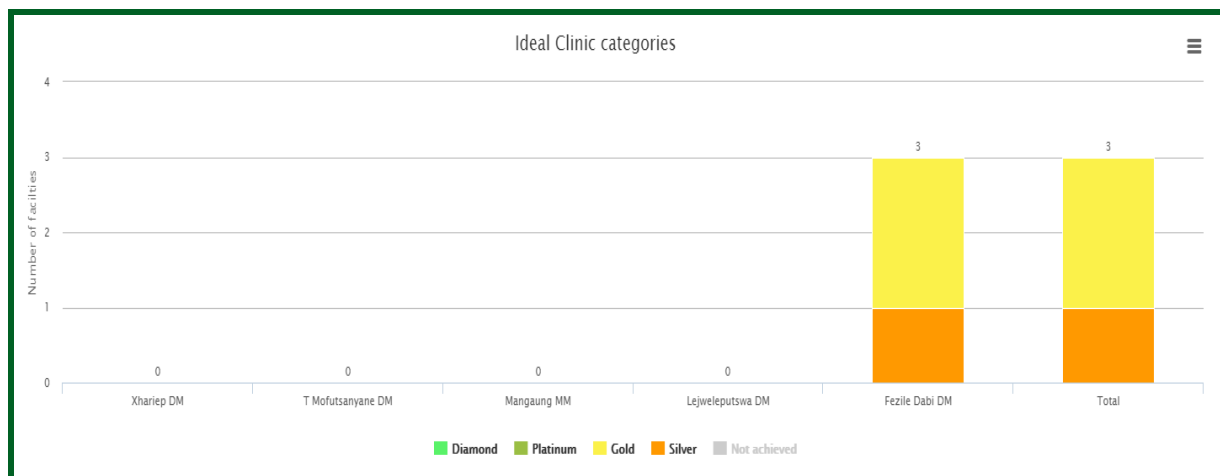


Figure 14: Number of facilities that obtained an Ideal Clinic category provincially

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 element which has the highest failure rate is the element that measures whether the resuscitation room is equipped with functional basic equipment for resuscitation (96%) followed by the element which measures whether the restoration of the emergency trolley daily or after every time it was used was done (95%). The least failure rate is recorded under the element that measures whether sharps containers are disposed off when they reach the limit mark (1%) as shown in Table 2.

Ideal Clinic Dashboard Reference	Responsibility	Percentage
Resuscitation room is equipped with functional basic equipment for resuscitation	Facility	96%
Restore the emergency trolley daily or after every time it was used	Facility	95%
There is a sterile emergency delivery pack	Facility	70%
Required functional diagnostic equipment and concurrent consumables for point of care testing are available	Facility	67%
90% of the tracer medicines are available	Facility	36%
There is constant supply of clean, running water to the facility	Facility	33%
The temperature of the medicine room/dispensary is recorded daily	Facility	12%
The temperature of the medicine room/dispensary is maintained within the safety range	Facility	11%
There is at least one functional wall mounted room thermometer in the medicine room/dispensary	Facility	10%
The temperature of the medicine refrigerator is recorded twice daily	Facility	5%

Oxygen cylinder with pressure gauges available in resuscitation/emergency room	Facility	5%
The temperature of the medicine refrigerator is maintained within the safety range	Facility	3%
Sharps are disposed of in impenetrable, tamperproof containers	Facility	2%
There is a thermometer in the medicine refrigerator	Facility	2%
Sharps containers are disposed of when they reach the limit mark	Facility	1%

Table 2: Provincial percentage of vital elements failed

3.2.4 Best and lowest performing facilities

The best performing facilities in the province is Heilbron Clinic that scored 87% and obtained gold (*Figure 15*). The lowest performing facility is Ma-haig Clinic (20%) (*Figure 16*).



Figure 15: Best performing facilities in the province

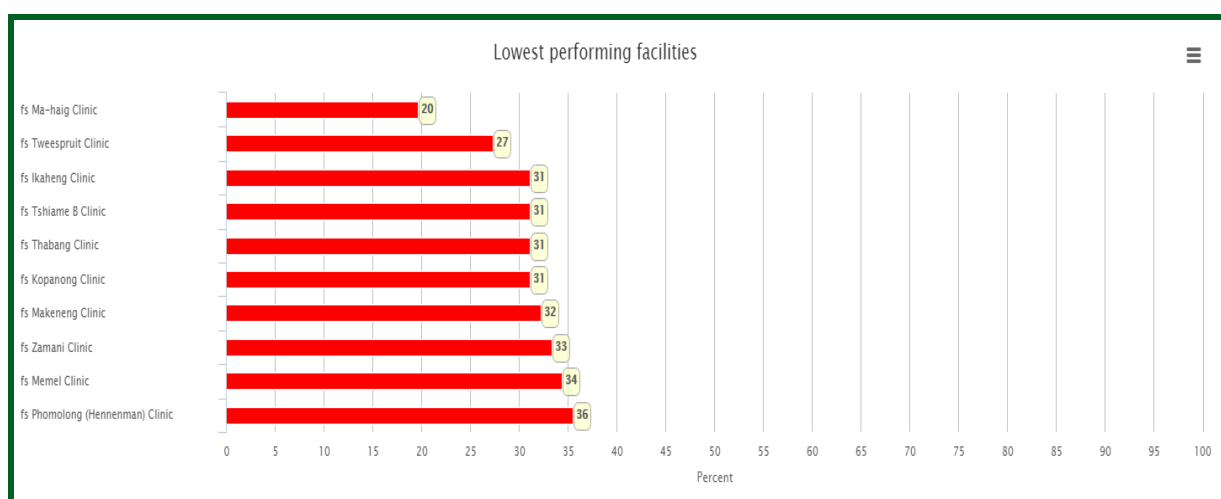


Figure 16: Lowest performing facilities in the province

3.2.5 Performance per component

The province performed the best in the Health Information Management component with an average score of 83%, followed by the Human Resources for Health (71%) while the component that scored the lowest is the Implementing Partners and Stakeholders that scored only 11% (Figure 17).

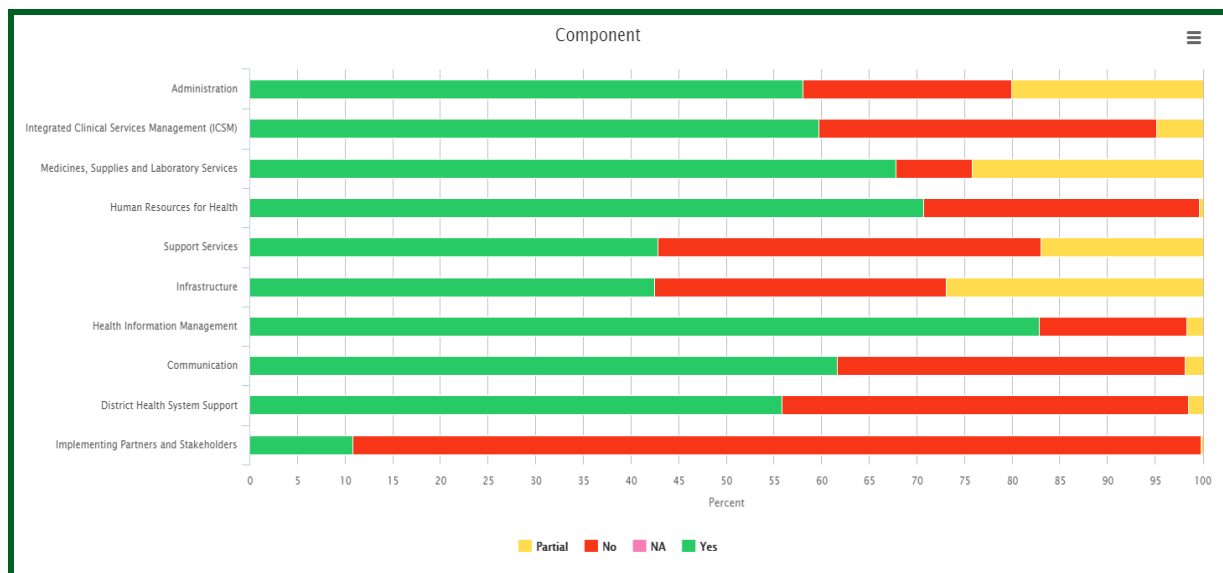


Figure 17: Performance per component for the province

3.2.6 Distribution of the overall scores of facilities

A total of 107 status determinations were conducted. The distribution of the overall scores obtained by the facilities is as follows:

- 10 facilities scored 80% and more,
- 17 facilities scored between 70% to 79%,
- 13 facilities scored between 60% to 69%,
- 52 facilities scored between 40% to 59% and
- 15 facilities scored less than 40%, see Figure 18 below.

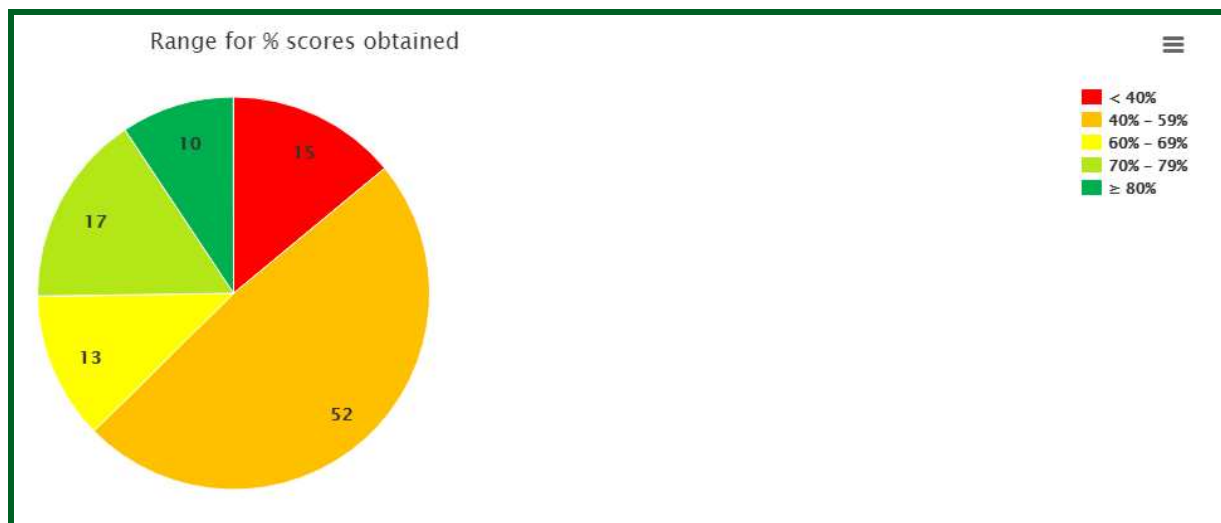


Figure 18: Provincial distribution of the overall scores of facilities

3.2.7 Scores per facility

Table 3 below displays the scores obtained per facility according to performance. The percentage score per facility range from 20% (Ma-haig Clinic) to 87% (Heilbron). As mentioned in sections 2.1 and 3.1 above, the one facility that does not have a status determination is Lesedi clinic which is a facility in a NHI district which in temporality closed due to vandalism. The SD will be conducted once it is re-opened.

District	Facility Name	% Score	Current Category
T Mofutsanyane DM	Ma-haig Clinic	20	Not achieved
T Mofutsanyane DM	Tweespruit Clinic	27	Not achieved
T Mofutsanyane DM	Kopanong Clinic	31	Not achieved
T Mofutsanyane DM	Thabang Clinic	31	Not achieved
T Mofutsanyane DM	Tshiamo B Clinic	31	Not achieved
T Mofutsanyane DM	Ikaheng Clinic	31	Not achieved
T Mofutsanyane DM	Makeneng Clinic	32	Not achieved
T Mofutsanyane DM	Zamani Clinic	33	Not achieved
T Mofutsanyane DM	Memel Clinic	34	Not achieved
Lejweleputswa DM	Phomolong (Henn) Clinic	36	Not achieved
T Mofutsanyane DM	Boiketlo Clinic	36	Not achieved
T Mofutsanyane DM	Namahali Clinic	36	Not achieved
T Mofutsanyane DM	Harrismith Clinic	37	Not achieved
T Mofutsanyane DM	Borwa Clinic	37	Not achieved
T Mofutsanyane DM	Bakenpark Clinic	39	Not achieved
T Mofutsanyane DM	Qholaqhwe Clinic	40	Not achieved
T Mofutsanyane DM	Tshirela Clinic	40	Not achieved

T Mofutsanyane DM	Makhalaneng Clinic	41	Not achieved
Fezile Dabi DM	Phekolong (Cornel) Clinic	42	Not achieved
T Mofutsanyane DM	Dinkweng Clinic	42	Not achieved
T Mofutsanyane DM	Makoane Clinic	42	Not achieved
Lejweleputswa DM	Dealesville Clinic	43	Not achieved
T Mofutsanyane DM	Nthabiseng Clinic	43	Not achieved
T Mofutsanyane DM	Mauersnek Clinic	43	Not achieved
T Mofutsanyane DM	Thaba Phatswa Clinic	43	Not achieved
T Mofutsanyane DM	Malesaona Clinic	44	Not achieved
T Mofutsanyane DM	Paballong Clinic	44	Not achieved
T Mofutsanyane DM	Sekamotho Mota Clinic	44	Not achieved
T Mofutsanyane DM	Excelsior Clinic	44	Not achieved
T Mofutsanyane DM	Meqheleng Clinic	44	Not achieved
T Mofutsanyane DM	Intabazwe Clinic	45	Not achieved
T Mofutsanyane DM	Mphatlalatsane Clinic	45	Not achieved
T Mofutsanyane DM	Clocolan Clinic	45	Not achieved
Lejweleputswa DM	Matjhabeng Clinic	46	Not achieved
T Mofutsanyane DM	Eva Mota Clinic	46	Not achieved
T Mofutsanyane DM	Matsieng Clinic	46	Not achieved
T Mofutsanyane DM	Reitz Clinic	46	Not achieved
T Mofutsanyane DM	Blue Gum Bush Clinic	47	Not achieved
T Mofutsanyane DM	Phuthaditjhaba Clinic	48	Not achieved
Lejweleputswa DM	Boshof Clinic	49	Not achieved
T Mofutsanyane DM	Tseki Clinic	49	Not achieved
T Mofutsanyane DM	Petsana Clinic	49	Not achieved
Lejweleputswa DM	Geneva Clinic	50	Not achieved
T Mofutsanyane DM	Monontsha Clinic	50	Not achieved
T Mofutsanyane DM	Phomolong (Ficksb) Clinic	51	Not achieved
T Mofutsanyane DM	Senekal Clinic	51	Not achieved
Xhariep DM	Matlakeng Clinic	51	Not achieved
T Mofutsanyane DM	Thaba Bosiu Clinic	52	Not achieved
T Mofutsanyane DM	Leseding Clinic	52	Not achieved
T Mofutsanyane DM	Lindley Clinic	52	Not achieved
Mangaung MM	Mafane Clinic	53	Not achieved
Lejweleputswa DM	Rearabetsoe (Virg) Clinic	54	Not achieved
Lejweleputswa DM	Tshwaraganang (H) Clinic	54	Not achieved
Mangaung MM	Sediba Clinic	54	Not achieved
T Mofutsanyane DM	Bethlehem Clinic	54	Not achieved
T Mofutsanyane DM	Relebohile (Rosen) Clinic	54	Not achieved
Lejweleputswa DM	Hani Park Clinic	55	Not achieved

T Mofutsanyane DM	Bolata Clinic	55	Not achieved
T Mofutsanyane DM	Boitumelo (Senekl) Clinic	55	Not achieved
Xhariep DM	Itumeleng (Jagers)	55	Not achieved
T Mofutsanyane DM	Matwabeng Clinic	56	Not achieved
T Mofutsanyane DM	Reitumetse Clinic	57	Not achieved
Lejweleputswa DM	Kgotsong (Welkom) Clinic	58	Not achieved
T Mofutsanyane DM	Leratswana Clinic	58	Not achieved
Lejweleputswa DM	Albert Luthuli Mem Clinic	59	Not achieved
T Mofutsanyane DM	Hlohlolwane Clinic	59	Not achieved
Xhariep DM	Luckhoff Clinic	59	Not achieved
Fezile Dabi DM	Lesedi CHC	60	Not achieved
T Mofutsanyane DM	Nothnagel Clinic	60	Not achieved
T Mofutsanyane DM	Rearabetswe Clinic	61	Not achieved
T Mofutsanyane DM	Vrede Clinic	61	Not achieved
Lejweleputswa DM	OR Tambo Clinic	62	Not achieved
T Mofutsanyane DM	Kokelong Clinic	63	Not achieved
Xhariep DM	Fauresmith Clinic	64	Not achieved
Mangaung MM	Bainsvlei Clinic	66	Not achieved
T Mofutsanyane DM	Soetwater Clinic	66	Not achieved
T Mofutsanyane DM	Fateng Tse Ntsho Clinic	68	Not achieved
Mangaung MM	Bayswater Clinic	69	Not achieved
Mangaung MM	Bophelong (Botsh) Clinic	69	Not achieved
Mangaung MM	Dr Pedro Memorial Clinic	69	Not achieved
Fezile Dabi DM	Philani Clinic	70	Not achieved
Fezile Dabi DM	PAX CHC	70	Not achieved
Mangaung MM	Potlako Motlohi Clinic	70	Not achieved
Fezile Dabi DM	Phedisong Clinic	71	Not achieved
T Mofutsanyane DM	Bohlokong Clinic	71	Not achieved
Mangaung MM	Molefi Tau Clinic	72	Not achieved
Mangaung MM	Thaba Nchu Clinic	73	Not achieved
T Mofutsanyane DM	Riverside Clinic	73	Not achieved
Mangaung MM	Langenhovenpark Clinic	74	Not achieved
T Mofutsanyane DM	Paul Roux Clinic	74	Not achieved
Xhariep DM	Philippolis Clinic	75	Not achieved
Mangaung MM	Mokwena Clinic	77	Not achieved
T Mofutsanyane DM	Tina Moloi Clinic	77	Not achieved
Mangaung MM	Harry Gwala (Bot) Clinic	78	Not achieved
T Mofutsanyane DM	Thusa Bophelo Clinic	78	Not achieved
Fezile Dabi DM	Relebohile (Heil) Clinic	79	Not achieved
Mangaung MM	Daniel Ngatane Clinic	79	Not achieved

Fezile Dabi DM	Sedibeng sa Bophel Clinic	80	Not achieved
Fezile Dabi DM	Metsimaholo Clinic	81	Not achieved
Fezile Dabi DM	Zamdela CHC	81	Silver
Fezile Dabi DM	Harry Gwala (Sasl) Clinic	83	Not achieved
Xhariep DM	Lebohang Clinic	83	Not achieved
Xhariep DM	Nelson Mandela Clinic	84	Not achieved
Fezile Dabi DM	Refengkgotso Clinic	85	Gold
Xhariep DM	Sehularo Tau Clinic	85	Not achieved
Fezile Dabi DM	Thusanang (Sasol) Clinic	86	Not achieved
Fezile Dabi DM	Heilbron Clinic	87	Gold
T Mofutsanyane DM	Lesedi Clinic		

Table 3: Scores per facilities

4. Conclusion

The province conducted SD submission in 107 facilities (99%). Once Lesedi Clinic is reopened the status determination for the facility must be conducted.

From the 107 facilities that conducted SD, three (3) facilities in Fezile Dabi DM obtained gold and silver ideal clinic status (*Figures 13 & 14*).

The facility that performed the best is Heilbron clinic (87%) and the facility that had the lowest score is, Ma-haig Clinic (20%) (*Table 3*).

The province should strive to improve all the vital elements where the failure rate was highest and those generally failed i.e. the restore of the emergency trolley daily or after every time it was used (95%) and resuscitation room is equipped with functional basic equipment for resuscitation (96%).

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.