

IDEAL CLINIC SOUTH AFRICA

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

PROVINCE:	Northern Cape
DATE OF REPORT GENERATION:	9 July 2016
VERSION:	16
FINANCIAL YEAR:	2016/2017



health

Department:
Health
REPUBLIC OF SOUTH AFRICA

Table of contents

1. Introduction.....	3
2. National overview	3
2.1 National overview of progress made with conducting status determination	3
2.2 National overview of outcome of status determination.....	4
2.2.1 Average percentage scored per province	4
2.2.2 Overall facility performance according to categories of Ideal Clinic	4
2.2.3 Percentage of Vital elements failed	5
2.2.4 Best and lowest performing districts	6
2.2.6 Performance per component	8
2.2.7 Distribution of the overall scores of facilities	9
3 Provincial and district overview	10
3.1 Provincial and district overview on progress made with conducting status determination	10
3.2 Provincial and district overview of outcome of status determination	10
3.2.1 Average percentage scored per district	10
3.2.2 Overall facility performance according to categories of Ideal Clinic	11
3.2.3 Percentage of Vital elements failed	11
3.2.4 Best and lowest performing facilities	12
3.2.5 Performance per component	13
3.2.6 Distribution of the overall scores of facilities	14
3.2.7 Scores per facility	15
4. Conclusion.....	17

List of figures

Figure 1: Data submission nationally.....	3
Figure 2: Average score per province	4
Figure 3: Percentage of facilities that obtained an Ideal Clinic category nationally	5
Figure 4: Number of facilities that obtained an Ideal Clinic category nationally.....	5
Figure 5: Best performing district nationally.....	7
Figure 6: Lowest performing district nationally.....	7
Figure 7: Best performing facilities nationally	8
Figure 8: Lowest performing facilities nationally	8
Figure 9: Performance per component nationally	9
Figure 10: National distribution of the overall scores of facilities.....	9
Figure 11: Data submission per district	10
Figure 12: Average score per district.....	10

Figure 13: Percentage of facilities that obtained an Ideal Clinic category provincially.....	11
Figure 14: Percentage of facilities that obtained an Ideal Clinic category provincially.....	11
Figure 15: Best performing facilities in the province	13
Figure 16: Lowest performing facilities in the province	13
Figure 17: Performance per component for the province.....	14
Figure 18: Provincial distribution of the overall scores of facilities	14

List of Tables

Table 1: National percentage of vital elements failed	6
Table 2: Provincial percentage of vital elements failed	12
Table 3: Scores per facilities	17

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.

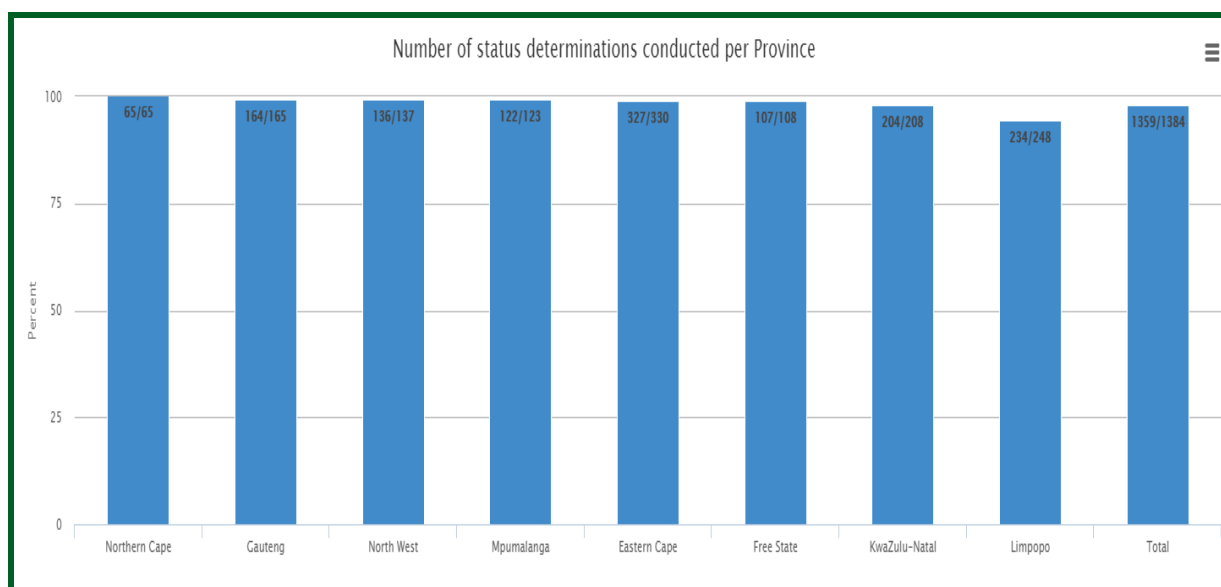


Figure 1: Data submission nationally

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.

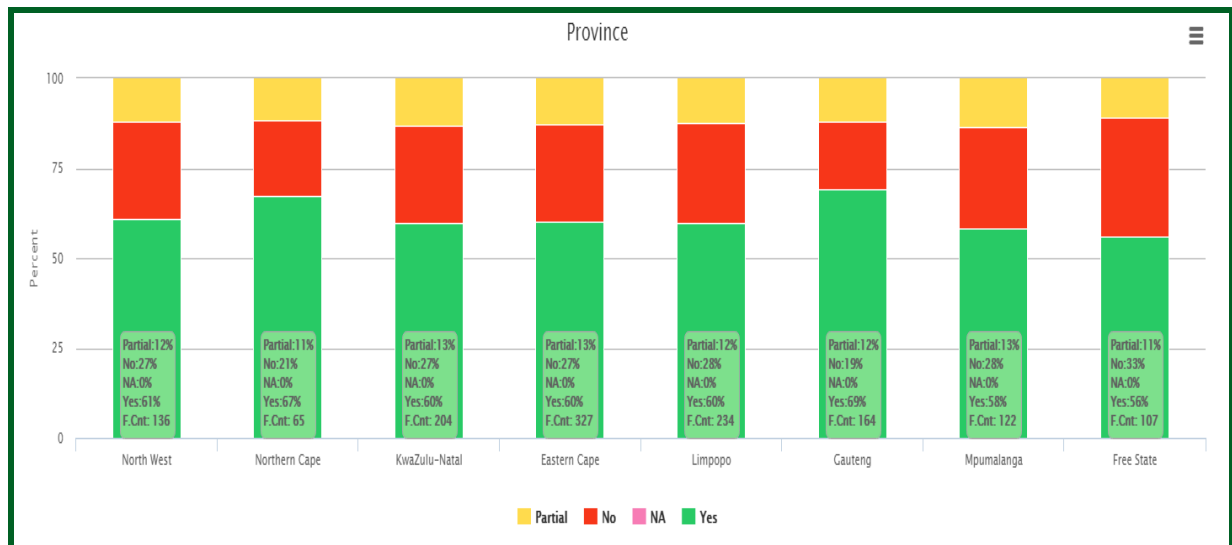


Figure 2: Average score per province

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*).

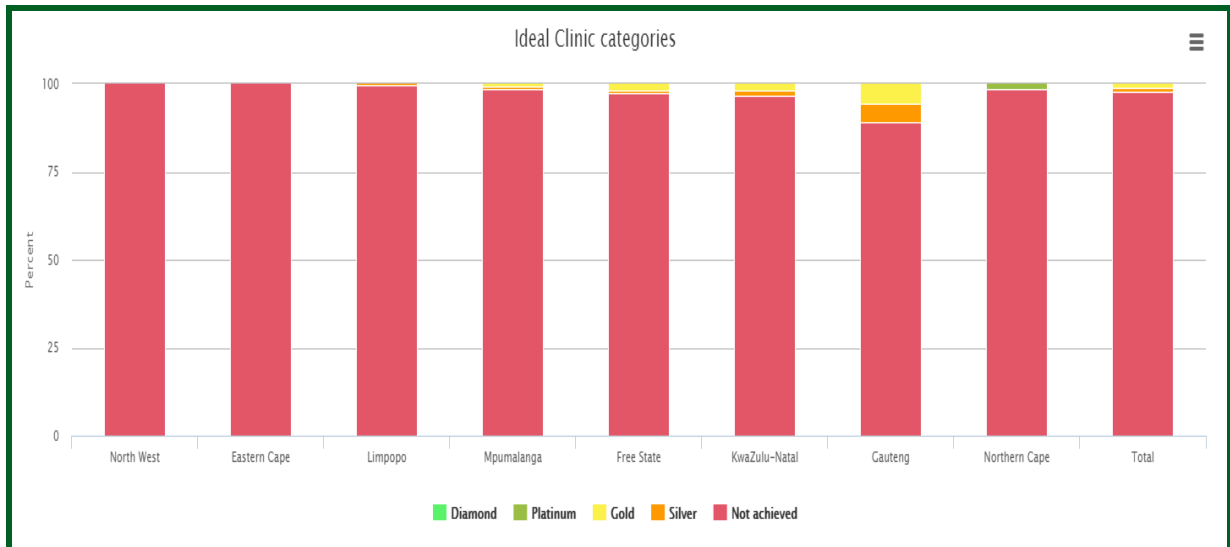


Figure 3: Percentage of facilities that obtained an Ideal Clinic category nationally

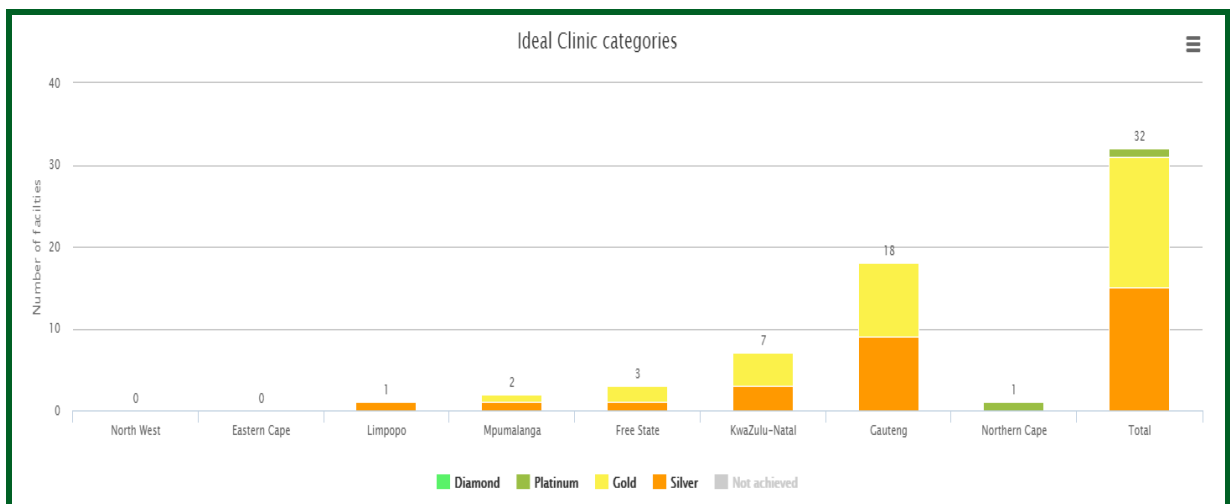


Figure 4: Number of facilities that obtained an Ideal Clinic category nationally

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).

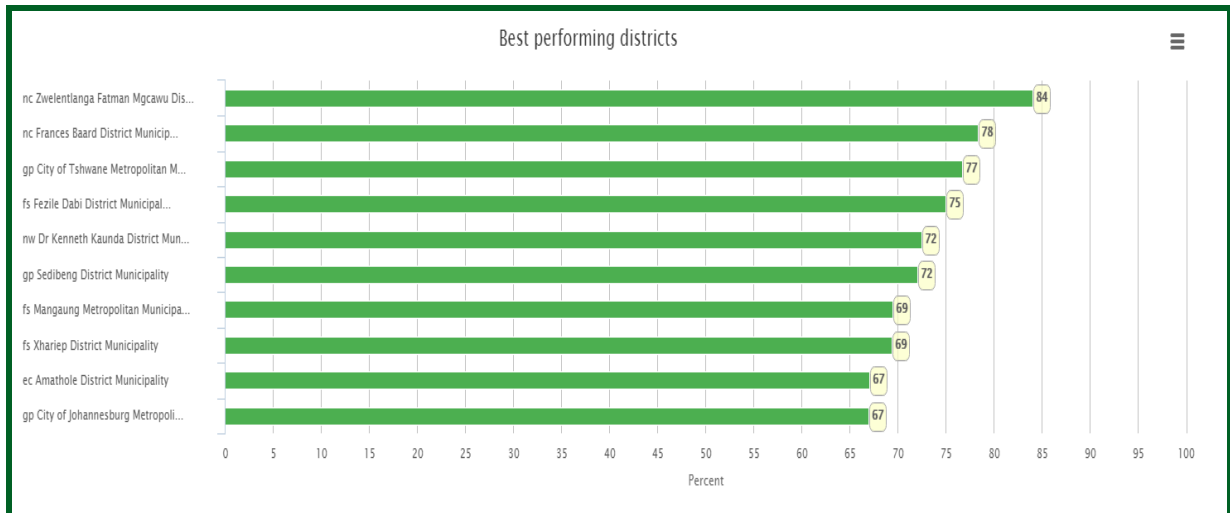


Figure 5: Best performing district nationally

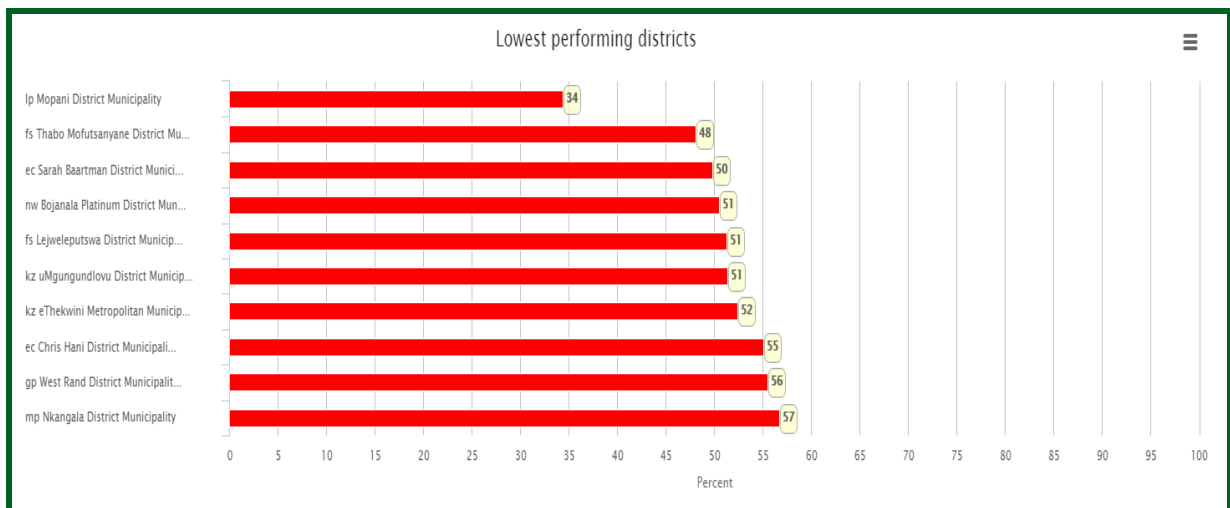


Figure 6: Lowest performing district nationally

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).

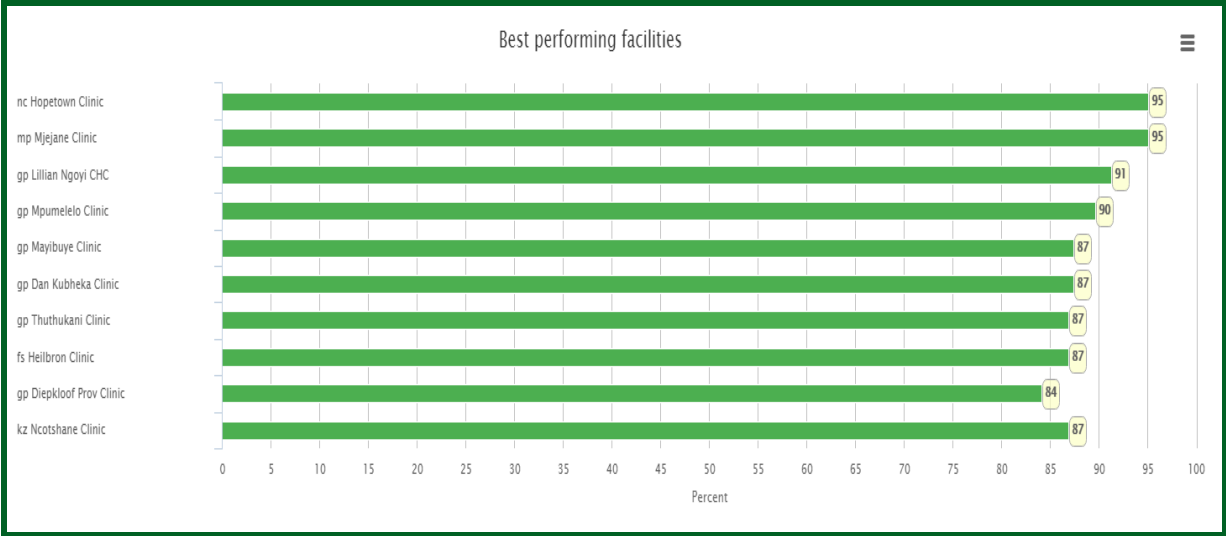


Figure 7: Best performing facilities nationally

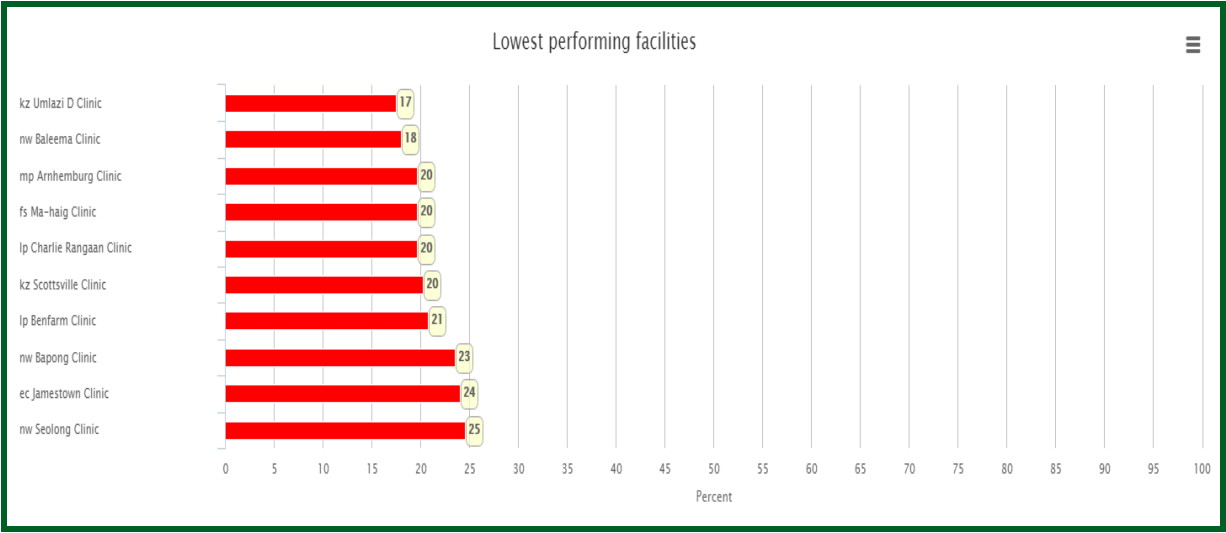


Figure 8: Lowest performing facilities nationally

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).

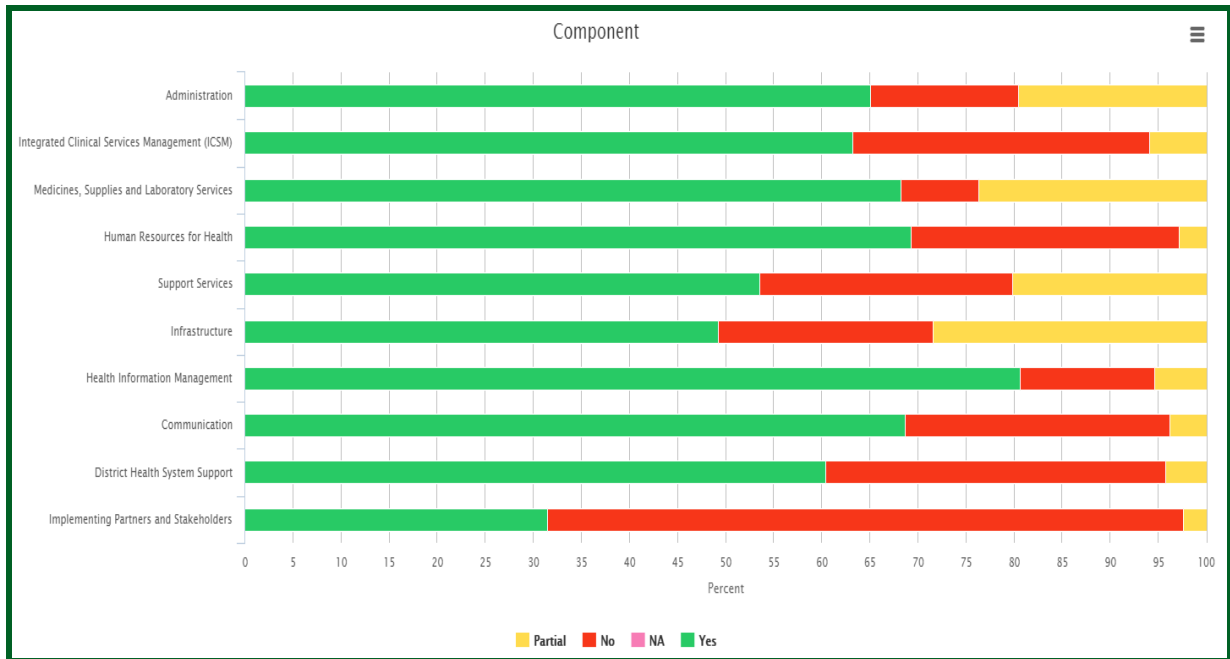


Figure 9: Performance per component nationally

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 100%; i.e. a total of 65 out of 65 facilities have conducted a SD in all the 5 districts of the province (Figure 11).

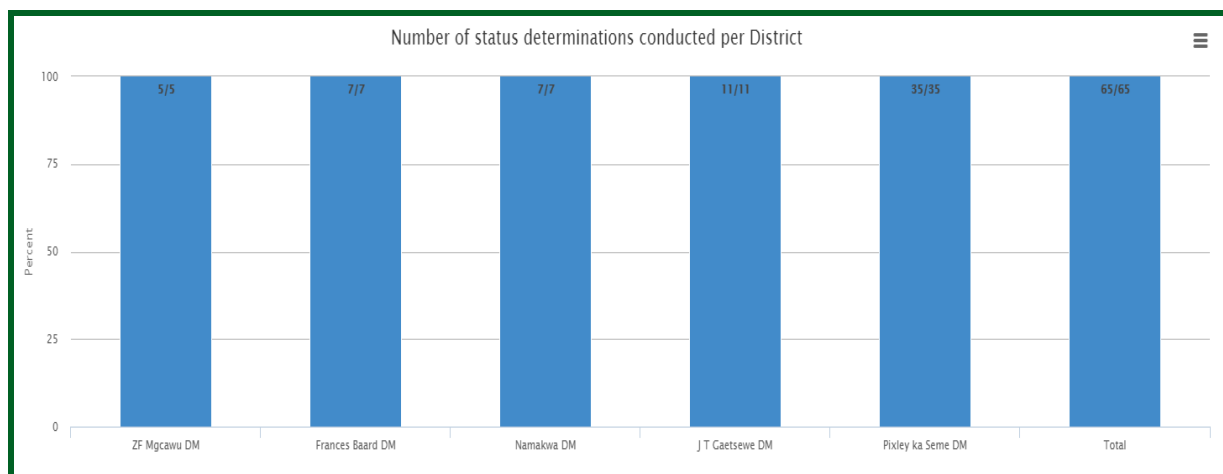


Figure 11: Data submission per district

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 63% (Pixley ke Seme DM) to 85% (ZF Mgcaawu 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.

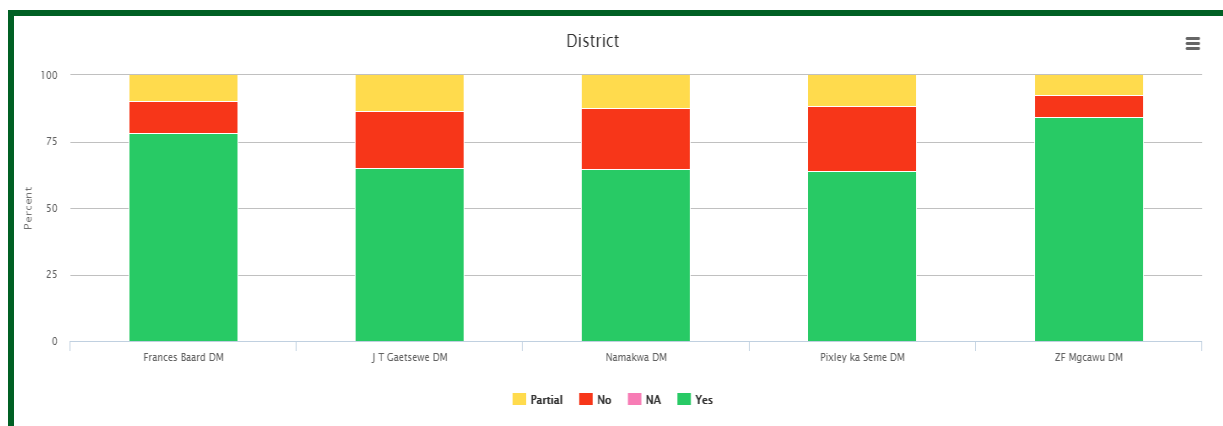


Figure 12: Average score per district

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. From the 65 facilities that conducted SD, only one facility obtained an Ideal Clinic Category across all the districts i.e. platinum in Pixley ka Seme DM.

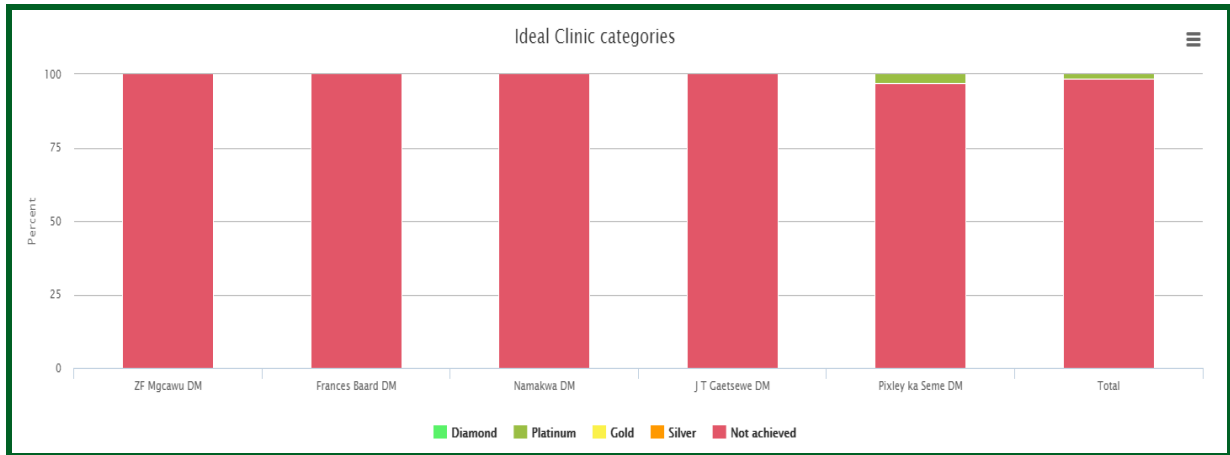


Figure 13: Percentage of facilities that obtained an Ideal Clinic category provincially

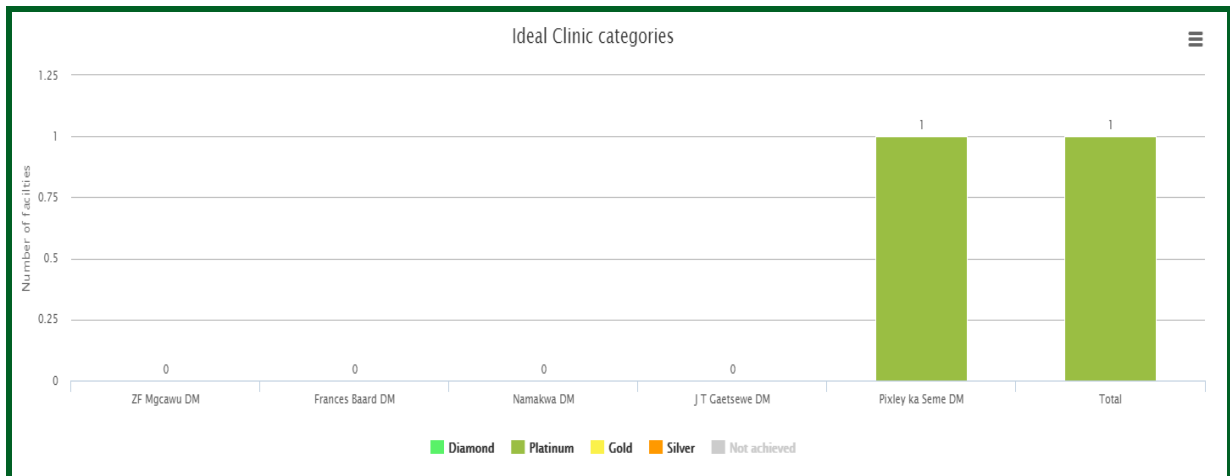


Figure 14: Percentage of facilities that obtained an Ideal Clinic category provincially

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 restoring the emergency trolley daily or after

every time it was used is done (97%) followed by the element that measures whether the resuscitation room is equipped with functional basic equipment for resuscitation (91%). The element which has the lowest failure rate is as shown in Table 2 below which scored 2%.

Ideal Clinic Dashboard Reference	Responsibility	Percentage
Restore the emergency trolley daily or after every time it was used	Facility	97%
Resuscitation room is equipped with functional basic equipment for resuscitation	Facility	91%
Required functional diagnostic equipment and concurrent consumables for point of care testing are available	Facility	85%
There is a sterile emergency delivery pack	Facility	72%
90% of the tracer medicines are available	Facility	20%
There is constant supply of clean, running water to the facility	Facility	17%
The temperature of the medicine room/dispensary is maintained within the safety range	Facility	11%
The temperature of the medicine room/dispensary is recorded daily	Facility	9%
There is at least one functional wall mounted room thermometer in the medicine room/dispensary	Facility	8%
The temperature of the medicine refrigerator is recorded twice daily	Facility	8%
The temperature of the medicine refrigerator is maintained within the safety range	Facility	5%
There is a thermometer in the medicine refrigerator	Facility	3%
Oxygen cylinder with pressure gauges available in resuscitation/emergency room	Facility	2%

Table 2: Provincial percentage of vital elements failed

3.2.4 Best and lowest performing facilities

The facility that performed the best is Hopetown Clinic that scored 95% for which it obtained platinum (*Figure 15*). The lowest performing facility is Richmond CHC that scored 38% (*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 (83%) followed by the Human Resources for Health (81%). The component that scored the lowest is the Infrastructure component that scored only 47% (Figure 17).

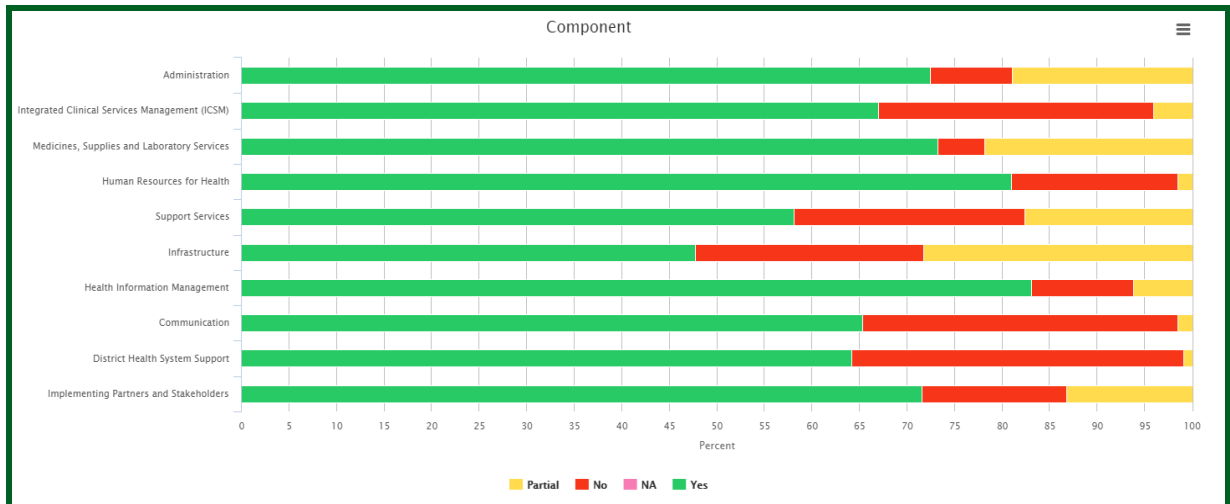


Figure 17: Performance per component for the province

3.2.6 Distribution of the overall scores of facilities

A total of 65 status determinations were conducted. The distribution of the overall scores obtained by the facilities is follow:

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

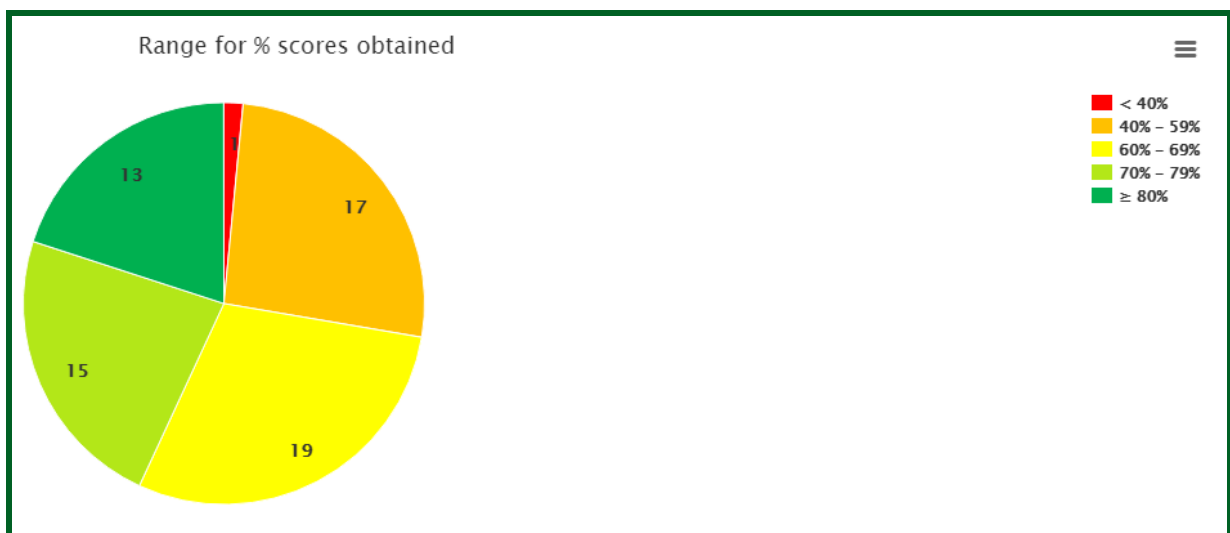


Figure 18: Provincial distribution of the overall scores of facilities

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 38% (Richmond CHC) to 95% (Hopetown Clinic).

District	Facility Name	Type	% Score	Current Category
Pixley ka Seme DM	Richmond CHC	Community Health Centre	38	Not achieved
Namakwa DM	Williston CHC	Community Health Centre	45	Not achieved
Pixley ka Seme DM	Breipaal	Clinic	49	Not achieved
Pixley ka Seme DM	Douglas CHC	Community Health Centre	50	Not achieved
Pixley ka Seme DM	Victoria West	Clinic	52	Not achieved
Pixley ka Seme DM	Noupoort CHC	Community Health Centre	53	Not achieved
J T Gaetsewe DM	Laxey	Clinic	54	Not achieved
Pixley ka Seme DM	Carnarvon CHC	Community Health Centre	54	Not achieved
Pixley ka Seme DM	Griekwastad CHC	Community Health Centre	54	Not achieved
Namakwa DM	Pofadder CHC	Community Health Centre	55	Not achieved
Pixley ka Seme DM	Kholekile Edward Twani	Clinic	55	Not achieved
J T Gaetsewe DM	Loopeng CHC	Community Health Centre	57	Not achieved
J T Gaetsewe DM	Mosalashuping	Clinic	57	Not achieved
Pixley ka Seme DM	Eurekaville Clinic	Clinic	57	Not achieved
Pixley ka Seme DM	Prieska Clinic	Clinic	58	Not achieved
Pixley ka Seme DM	Loxton Clinic	Clinic	58	Not achieved
Pixley ka Seme DM	Nanqo Simon Zono Clinic	Clinic	58	Not achieved
Pixley ka Seme DM	Campbell	Clinic	59	Not achieved
Namakwa DM	Okiep	Clinic	60	Not achieved
Pixley ka Seme DM	Britstown Clinic	Clinic	60	Not achieved
Pixley ka Seme DM	Kuyasa	Clinic	60	Not achieved
J T Gaetsewe DM	Heuningvlei	Clinic	61	Not achieved
Pixley ka Seme DM	Richmond Clinic	Clinic	61	Not achieved
J T Gaetsewe DM	Logobate	Clinic	62	Not achieved
Namakwa DM	Nababeep Clinic	Clinic	63	Not achieved

Pixley ka Seme DM	Hopetown CHC	Community Health Centre	63	Not achieved
Pixley ka Seme DM	Strydenburg	Clinic	63	Not achieved
Pixley ka Seme DM	Norvalspont	Clinic	63	Not achieved
Frances Baard DM	Pholong	Clinic	66	Not achieved
J T Gaetsewe DM	Padstow	Clinic	66	Not achieved
Pixley ka Seme DM	Victoria West CHC	Community Health Centre	66	Not achieved
Pixley ka Seme DM	Van Wyksvlei Clinic	Clinic	67	Not achieved
Pixley ka Seme DM	De Aar Clinic	Clinic	68	Not achieved
Pixley ka Seme DM	Masibambane Clinic	Clinic	68	Not achieved
Pixley ka Seme DM	Petrusville Clinic	Clinic	68	Not achieved
J T Gaetsewe DM	Tsineng	Clinic	69	Not achieved
J T Gaetsewe DM	Van Zylsrus Clinic	Clinic	69	Not achieved
J T Gaetsewe DM	Bendel	Clinic	70	Not achieved
Pixley ka Seme DM	Montana	Clinic	70	Not achieved
Pixley ka Seme DM	Keurtjieskloof Clinic	Clinic	71	Not achieved
Pixley ka Seme DM	Lehlohonolo Adams Clinic	Clinic	71	Not achieved
Pixley ka Seme DM	Niekerkshoop Clinic	Clinic	72	Not achieved
Pixley ka Seme DM	Lowryville	Clinic	72	Not achieved
ZF Mgcawu DM	Nelson R. Mandela Clinic	Clinic	72	Not achieved
Namakwa DM	Hondeklipbaai Clinic	Clinic	73	Not achieved
Pixley ka Seme DM	De Aar Town Clinic	Clinic	73	Not achieved
Frances Baard DM	Dr Torres	Clinic	74	Not achieved
J T Gaetsewe DM	Mecwetsaneng	Clinic	75	Not achieved
Pixley ka Seme DM	Carnarvon Clinic	Clinic	76	Not achieved
Namakwa DM	Garies	Clinic	77	Not achieved
Frances Baard DM	Jerry Botha Clinic	Clinic	78	Not achieved
J T Gaetsewe DM	Gadiboe	Clinic	78	Not achieved
Frances Baard DM	Mataleng	Clinic	80	Not achieved
Frances Baard DM	Florianville (Floor)	Clinic	80	Not achieved
Pixley ka Seme	Hanover Clinic	Clinic	80	Not achieved

DM				
Frances Baard DM	Nomimi Mothibi	Clinic	81	Not achieved
Namakwa DM	Joe Slovo CHC	Community Health Centre	81	Not achieved
Pixley ka Seme DM	Vosburg CHC	Community Health Centre	81	Not achieved
Pixley ka Seme DM	Marydale Clinic	Clinic	81	Not achieved
ZF Mgcawu DM	Rietfontein	Community Health Centre	85	Not achieved
ZF Mgcawu DM	Askham	Community Health Centre	87	Not achieved
ZF Mgcawu DM	Louisvalebweg Clinic	Clinic	88	Not achieved
ZF Mgcawu DM	Sarah Strauss	Clinic	88	Not achieved
Frances Baard DM	Beaconsfield	Clinic	90	Not achieved
Pixley ka Seme DM	Hopetown Clinic	Clinic	95	Platinum

Table 3: Scores per facilities

4. Conclusion

The province has concluded the status determination for all 65 (100%) facilities (Figure 11).

From the 65 facilities that conducted SD data capturing, only 1 facility obtained an IC status (Figures 13 and 14). The province should work towards having more facilities that achieve an Ideal Clinic status.

The province performed the best in the Health Information Management (83%) followed by the Human Resources for Health (81%). The component that scored the lowest is the Infrastructure component that scored only 47% (Figure 17).

The province should strive to improve all the vital elements that they are currently failing as shown in Table 2 above.

Hopetown Clinic obtained the highest score (95%) while Richmond CHC obtained the lowest score (38%) (Table 3).

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 18 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.