

19 North West Province

Bojanala Platinum District Municipality

Nandy Mothupi

Bojanala Platinum District is situated in the north-eastern corner of the North West Province. The estimated proportion of the population with medical scheme coverage is 13.1%.

The proportion of the district health services expenditure in 2012/13 on district management was 7.8%, while 25.7% was spent on district hospitals. The proportion of the district health services expenditure on primary health care (PHC) decreased from 68.3% in 2011/12 to 66.4% in 2012/13.

The PHC supervisor visit rate (fixed clinic/CHC/CDC) increased from 47.3% in 2011/12 to 57.7% in 2012/13. However, this is still the lowest in the province and well below the national average of 76.0%.

The inpatient bed utilisation rate increased from 74.6% in 2011/12 to 81.2% in 2012/13. This rate has increased steadily since 2008/09. The average length of stay was 3.4 days, shorter than the provincial length of stay of 3.7 days. The expenditure per patient day equivalent was R1 835, in line with the national average of R1 823. The ratio of ambulatory to inpatient days was 1.5, slightly higher than the national ratio of 1.3. A ratio of more than one means that more clients are seen at the emergency unit/OPD clinics than are admitted to hospital. The OPD new client not referred rate is 72.5%, a huge increase from 20.5% in 2011/12. This very large increase is due to Brits Hospital reporting around 90% of new clients as 'not referred' from 2012/13. This implies that there is no gatekeeping and no referral system in place.

The proportion of deliveries in facilities by women under 18 years was 6.3% in 2012/13, similar to 2011/12. The delivery by Caesarean section rate increased from 20.9% in 2011/12 to 23.5% in 2012/13. The stillbirth rate was 24.0 per 1 000 births, and the inpatient early neonatal death rate was 9.4 per 1 000 live births. The facility maternal mortality ratio reflected a slight decrease from 172.4 per 100 000 live births in 2011/12 to 164.1 in 2012/13. This is still well above the national average of 132.9 per 100 000 live birth.

The antenatal 1st visit before 20 weeks rate was 42.1% and has been increasing annually since 2009/10 when it was 33.4%. The 2011 HIV prevalence among antenatal clients tested (according to the 2011 National Antenatal Sero-prevalence Survey) was 33.9%, higher than the provincial prevalence of 30.2% and the national prevalence of 29.5%. This rate has fluctuated considerably in the past four years. The rate of antenatal clients initiated on ART at 62.8% was lower than the 74.7% of the province, the national rate of 81.6% and the target of 85%.

Data from the National Health Laboratory Services (NHLS) showed that the early infant HIV diagnosis coverage increased slightly from 43.4% in 2011/12 to 48.7% in 2012/13. This was the lowest in the province and well below the national coverage of 73.9%. The infant 1st PCR test positive around 6 weeks rate (DHIS data) was 2.4%, which correlated well with the proportion of PCR tests HIV positive for infants under two months of age (NHLS data) of 2.5%.

The immunisation coverage under 1 year was 60.9%, which was lower than the provincial coverage of 63.1% for 2011/12. The measles 1st to 2nd dose drop-out rate decreased from 27.9% in 2011/12 to 24.1% in 2012/13. This indicates that many children are still not receiving the second measles vaccination.

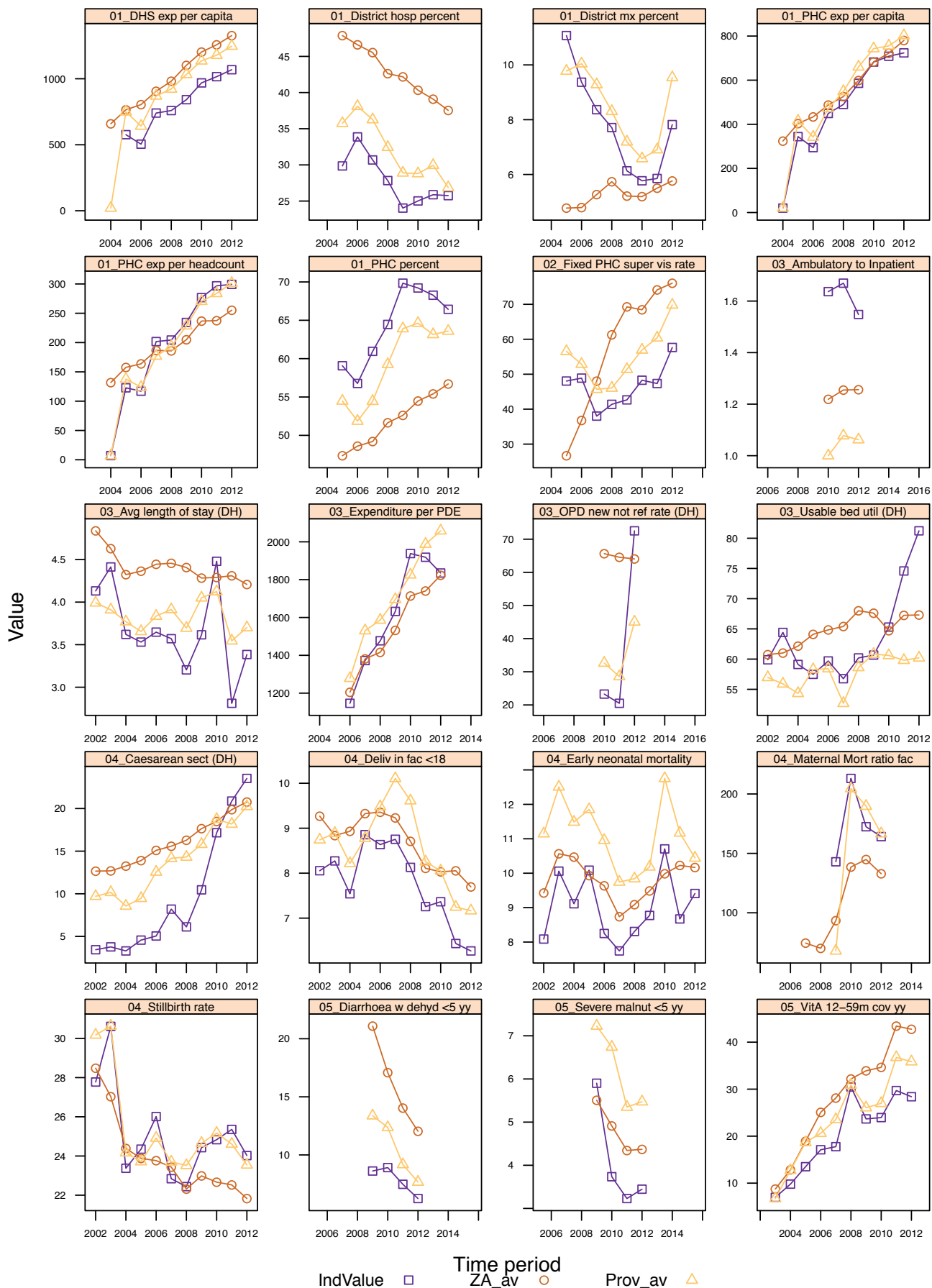
The child under 5 years diarrhoea with dehydration incidence was 6.2 per 1 000 children, and was well below the national incidence of 12.0 per 1 000 children. The child under 5 years diarrhoea case fatality rate was 11.3%, a very large increase from the incidence of 6.9% in 2011/12, and the fourth highest incidence in the country. The child under 5 years pneumonia incidence dropped from 44.0 per 1 000 children in 2011/12 to 28.8 per 1 000 children. This was the lowest in the province and the fifth lowest nationally. The child under 5 years pneumonia case fatality rate was 7.7%, higher than the provincial rate of 5.1%. At 3.4 per 1 000 children, the child under 5 years severe acute malnutrition incidence was the lowest in the province. However, at 17.5%, the child under 5 years severe acute malnutrition case fatality rate was the highest in the province. Therefore, in general, the incidence rates for key childhood illnesses are lower than average, but the case fatality rates are worse than average for this district. The vitamin A coverage in children aged 12 to 59 months was 28.4%, the lowest rate in the province and the third lowest in the country.

The couple year protection rate increased from 24.4% in 2011/12 to 30.1% in 2012/13. There has been a downward trend in the cervical screening coverage from 49.3% in 2008/09 to 37.9% in 2012/13.

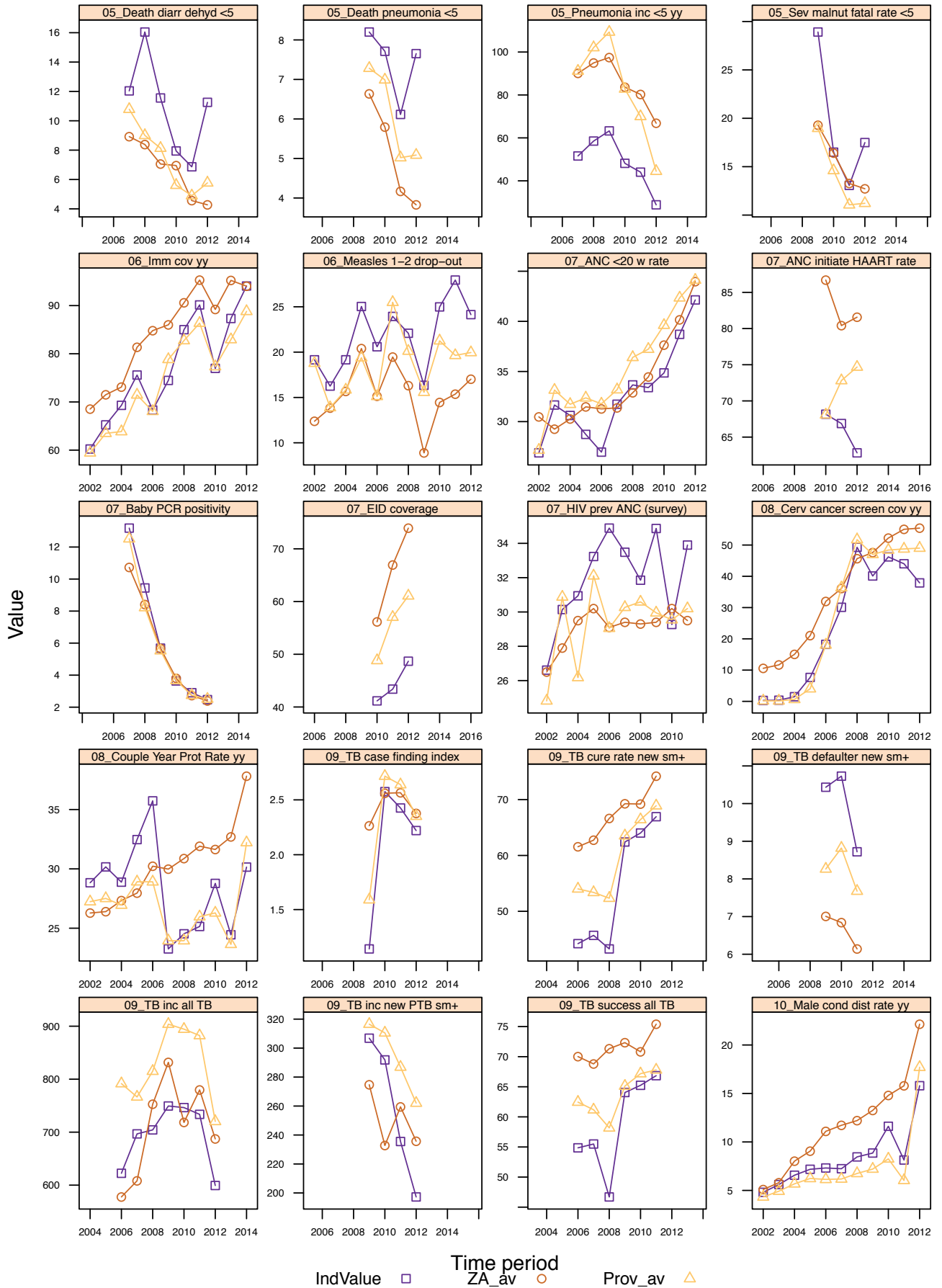
The TB incidence (all cases) was 599.3 per 100 000 people, below the provincial and national averages of 720.2 and 687.3 per 100 000 people respectively. The number of cases diagnosed with TB (new pulmonary smear-positive) decreased from 3 164 in 2011 to 2 676. TB incidence (new pulmonary smear-positive) was 197.2 per 100 000 people, the lowest incidence in the province and well below the national incidence of 235.7. The TB case finding index was 2.2%. The TB cure rate (new pulmonary smear-positive) increased from 64.0% in 2010 to 66.9% in 2011, but was still below the provincial rate of 68.9% and the national rate of 74.2%. The TB defaulter rate (new pulmonary smear-positive) was 8.7%, the highest rate in the province. The TB successful treatment rate (all TB) was 66.8% and well below the national rate of 75.4%.

The male condom distribution coverage increased from 8.1 condoms per male 15 years and older in 2011/12 to 15.8 condoms in 2012/13. This was, however, below the provincial average of 17.7 and the national average of 22.1 condoms. The total number of adults remaining on ART at the end of the month by the end of 2012/13 was 61 195 and had increased from 41 459 in 2011/12. There were 1 951 children under 15 years remaining on ART at the end of the month by the end of 2012/13, an increase of 172 from the previous year.

Annual indicators for district: Bojanala: DC37



Annual indicators for district: Bojanala: DC37



Ngaka Modiri Molema District Municipality

Naomi Massyn

Ngaka Modiri Molema District in the North West Province has an estimated medical scheme coverage of 8.1%.

The proportion of district health services expenditure on district management increased from 7.7% in 2011/12 to 9.3% in 2012/13. The proportion of total district expenditure on primary health care (PHC) remained stable at 61.4%, and the percentage expenditure on district hospital services was 29.3%.

At 70.8%, the PHC supervisor visit rate (fixed clinic/CHC/CDC) was below the national average of 76.0%.

The inpatient bed utilisation rate has decreased annually over the past four years, from 60.9% in 2008/09 to 47.6% in 2012/13. This rate was the lowest in the province and well below the national rate of 67.3%. The average length of stay was 3.9 days. At R2 425, the expenditure per patient day equivalent was the highest in the province and well above the national (R1 823) average. The ratio of ambulatory to inpatient days was 0.8, indicating that more patients are admitted as inpatients than are seen at the emergency unit and/or outpatient department. The OPD new client not referred rate was 45.5%, showing that just less than 50% of clients bypass PHC facilities and access hospitals directly.

The delivery by Caesarean section rate was 19.4%, an increase of one percentage point from the previous year. The delivery in facility under 18 years rate was 7.7% and on par with the national rate of 7.7%. The facility maternal mortality ratio was 141.4 per 100 000 live births and the lowest in the province. The stillbirth in facility rate remained stable at 24.3 per 1 000 births, the highest in the province and above the national rate of 21.8 per 1 000 births. The inpatient early neonatal death rate decreased from 12.0 per 1 000 live births in 2011/12 to 10.5.

The antenatal 1st visit before 20 weeks rate was 50.2%; this was the best in the province and well above the national rate of 44.0%. The 2011 National Antenatal Sero-prevalence Survey shows a slight decrease in the HIV prevalence among antenatal clients tested, from 25.9% in 2010 to 24.9% in 2011. The antenatal client initiated on ART rate increased from 76.9% in 2011/12 to 84.5%, and was above the national rate of 81.6%.

Data from the National Health Laboratory Services (NHLS) showed that the early infant HIV diagnosis coverage was 135.0%. A value of more than 100% might be due to poor data quality or that babies born in another district are tested in the Ngaka Modiri Molema District. The infant 1st PCR test positive around 6 weeks rate (DHIS data) was 2.7%, a decrease from 4.1% in 2011/12. The proportion of PCR tests HIV positive for infants under two months of age (NHLS data) of 2.2% was lower than the DHIS value of 2.7%.

The immunisation coverage under 1 year increased from 77.7% in 2011/12 to 86.7%, in line with the provincial (88.8%) and below the national (94.0%) coverage. At 16.1%, the measles 1st to 2nd dose drop-out rate was the second lowest in the province and below the national rate of 17.0%.

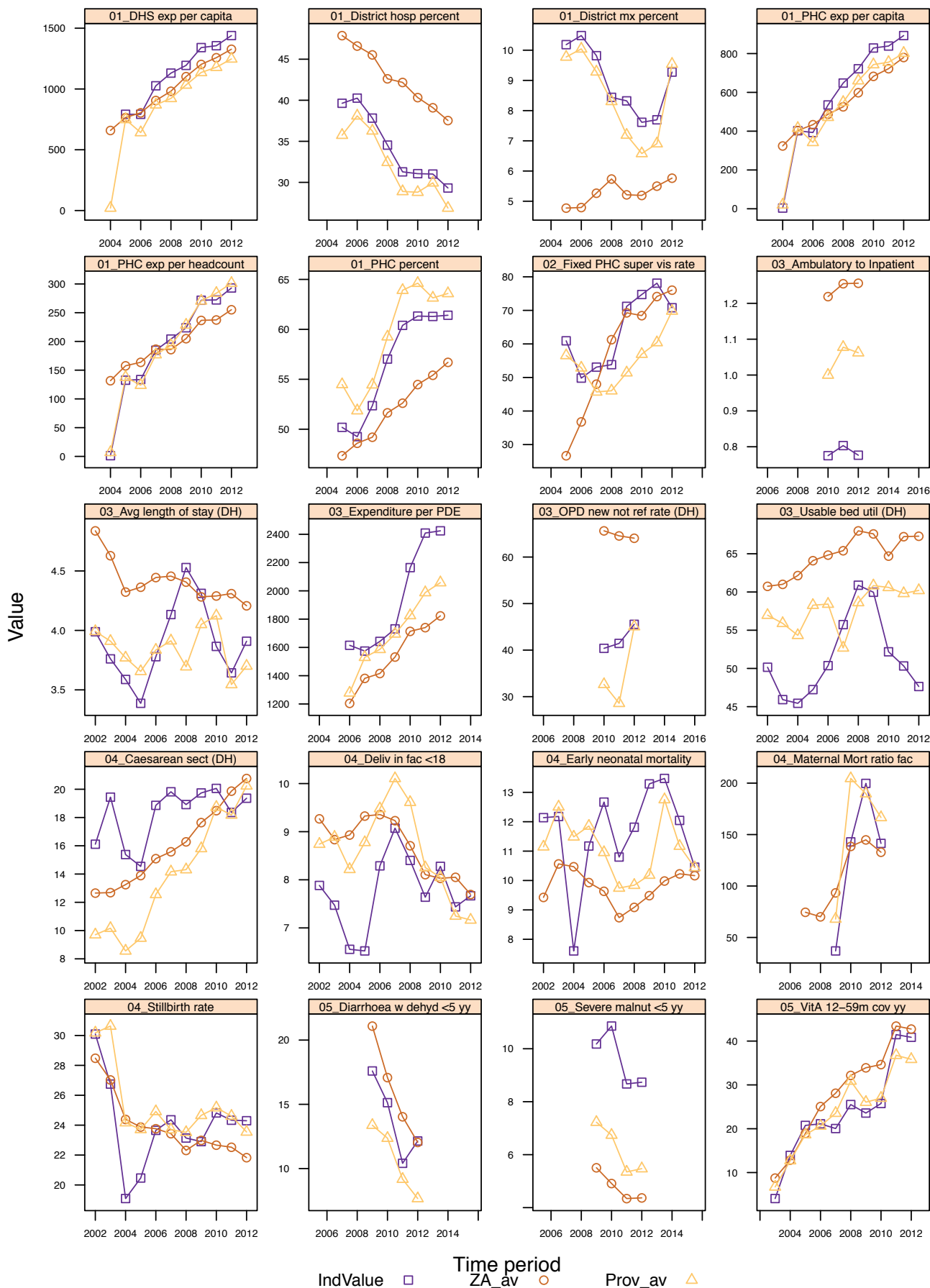
The child under 5 years diarrhoea with dehydration incidence was 12.1 episodes per 1 000 children. The child under 5 years diarrhoea case fatality rate was 4.4%. The child under 5 years pneumonia incidence decreased dramatically from 112.7 cases per 1 000 children in 2011/12 to 68.1 in 2012/13, and was still the highest in the province and above the national (66.8 per 1 000 children) incidence. The child under 5 years pneumonia case fatality rate was also 4.4%, also the highest in the province and above the national rate of 3.8%. At 8.7 cases per 1 000 children, the child under 5 years severe acute malnutrition incidence was the highest in the province and well above the national incidence of 4.4, while the child under 5 years severe acute malnutrition case fatality rate was 9.4%. The vitamin A coverage in children aged 12 to 59 months was 40.9%.

The cervical cancer screening coverage was 44.7%, a decrease from 51.0% in 2011/12 and almost 10 percentage points below the national coverage of 55.4%. The couple year protection rate of 40.3% was the highest in the province; this was above the national rate of 37.8% and almost double the rate of 22.3% in 2011/12, primarily due to a huge increase in male condom distribution.

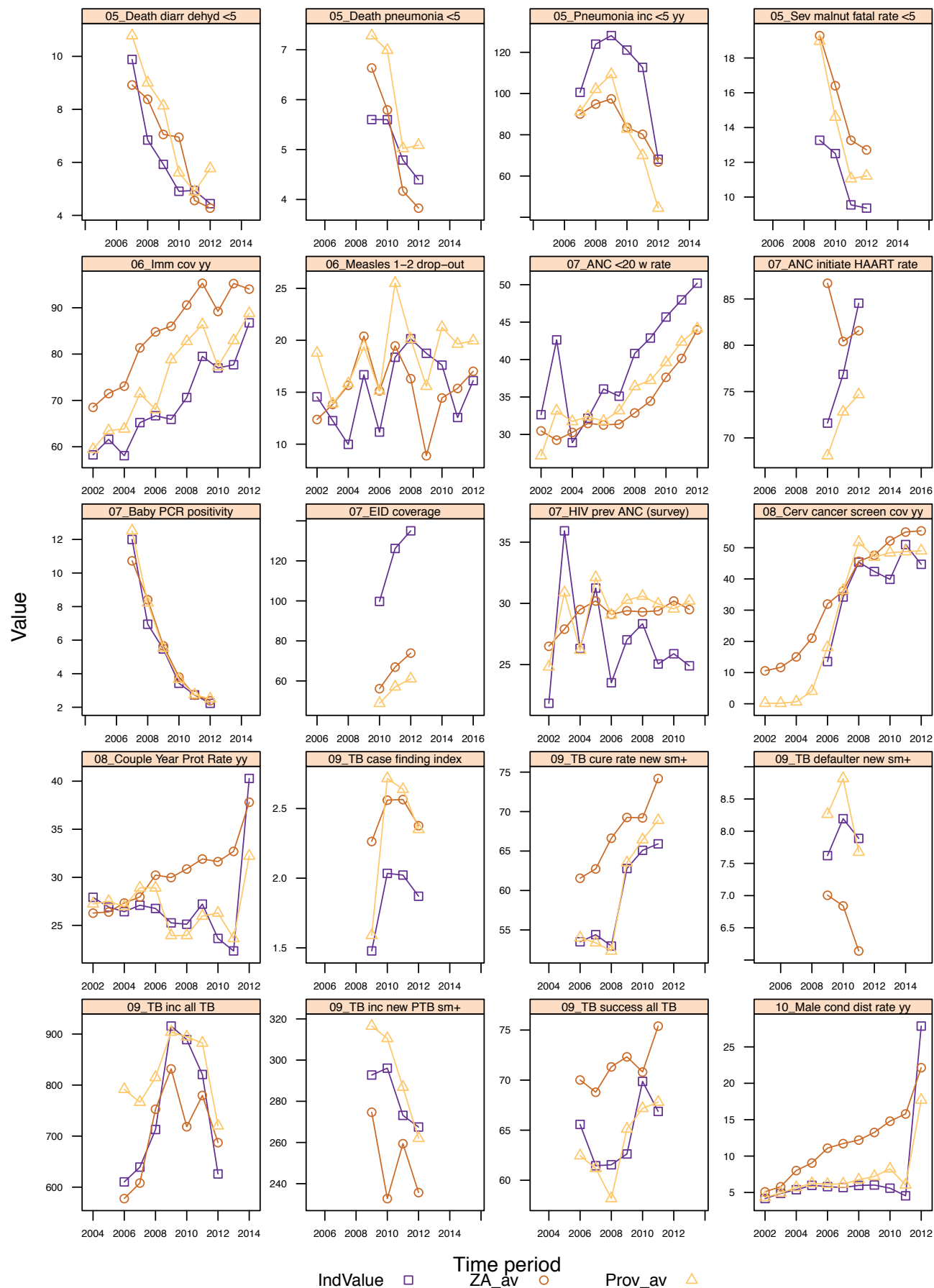
The TB incidence (all cases) was 625.9 per 100 000 people and was below the provincial and national averages of 720.2 and 687.3 per 100 000 people respectively. The TB case finding index was 1.9% and the lowest in the province. The number of cases diagnosed with TB (new pulmonary smear-positive) decreased from 2 181 in 2011 to 2 140, and the TB incidence (new pulmonary smear-positive) decreased from 273.2 per 100 000 people to 267.5, but it was still above the national incidence of 235.7. The TB cure rate (new pulmonary smear-positive) was 65.9%, the lowest rate in the province. The TB defaulter rate (new pulmonary smear-positive) was 7.9%, a slight decrease from 8.2% in 2010 but above the national rate of 6.1%, and the TB treatment success rate (all TB) was 66.9%.

The male condom distribution coverage was 27.9 condoms per male 15 years and older, a significant increase from 4.5 in 2011/12. This was above the national average of 22.1 condoms. The total number of adults remaining on ART at end of the month increased from 25 627 by the end of 2011/12 to 30 580 at the end of 2012/13. The total number of children under 15 years remaining on ART at end of the month also increased from 1 779 to 1 951 in the same period.

Annual indicators for district: Ngaka Modiri Molema: DC38



Annual indicators for district: Ngaka Modiri Molema: DC38



Ruth Segomotsi Mompoti District Municipality

Nandy Mothupi

Ruth Segomotsi Mompoti District in the North West Province borders on Botswana in the north. The proportion of the population with medical scheme coverage was estimated at 6.2%.

The proportion of the district health services expenditure on district management was 10.0%. The percentage expenditure on district hospital services was 32.7% and decreased by 10.1 percentage points from 2011/12, whereas the proportion of total district expenditure on primary health care (PHC) increased from 50.0% in 2011/12 to 57.3% in 2012/13, but was the lowest in the province.

The PHC supervisor visit rate (fixed clinic/CHC/CDC) showed commendable improvement with an increase from 57.4% in 2011/12 to 93.2% in 2012/13, higher than the national average of 76.0%.

The inpatient bed utilisation rate was 57.3% in 2011/12 and has decreased to 55.8% in 2012/13. This is the lowest rate since 2008/09. The average length of stay (ALOS) was 4.1 days and longer than the provincial length of stay of 3.7 days. The ALOS remained more than four days and has been the highest provincially since 2009/10. The expenditure per patient day equivalent was R2 011 and higher than the national average of R1 823. The ratio of ambulatory to patient days was 1.0, slightly below the national ratio of 1.3. The OPD new client not referred rate was 6.6% and dropped from 25.7% in 2011/12. This indicates that a relatively lower percentage of clients bypass PHC facilities and access district hospitals directly.

The delivery in facilities by women under 18 years was 9.3% in 2011/12 and increased minimally to 9.7% in 2012/13. This was the highest in the province. The rate of delivery by Caesarean section was 22.0%. The stillbirth rate was 23.3 per 1 000 births and the inpatient early neonatal death rate 8.0 per 1 000 live births. The facility maternal mortality ratio reflected an increase from 123.3 per 100 000 live births in 2011/12 to 142.9 per 100 000 live births in 2012/13, and was well above the national ratio of 132.9 per 100 000 live births.

The antenatal 1st visit before 20 weeks rate was 47.2% and higher than the national rate of 44.0%. The 2011 National Antenatal Sero-prevalence Survey shows a decrease in the HIV prevalence among antenatal clients, from 24.5% in 2010 to 20.5% in 2011, and was the lowest in the province. The antenatal client initiated on ART rate of 83.5% was higher than the provincial value of 74.7% and higher than the national average of 81.6% for 2012/13.

The early infant HIV diagnosis coverage (NHLS data) was 53.6% and the proportion of infants who were HIV-positive under two months was 2.4%. The NHLS data showed one percentage point higher than the DHIS percentage of babies that tested PCR-positive six weeks after birth of 3.4%.

The immunisation coverage under 1 year was 98.9% in 2011/12, increasing to 108.3% in 2012/13 – although immunisation rates above 100% suggest poor data quality or incorrect catchment population figures. The measles 1st to 2nd dose drop-out rate increased from 12.6% in 2011/12 to 16.0% in 2012/13, although this was the lowest provincially.

The child under 5 years diarrhoea with dehydration incidence was 5.5 episodes per 1 000 children. The child under 5 years diarrhoea case fatality rate was 2.7%. The child under 5 years pneumonia incidence decreased from 74.3 cases per 1 000 children in 2011/12 to 47.0 in 2012/13. The child under 5 years pneumonia case fatality rate was 3.8%, the lowest in the province and on par with the national rate of 3.8%. The child under 5 years severe acute malnutrition incidence was 3.5 cases per 1 000 children. The child under 5 years severe acute malnutrition case fatality rate was 12.7% and on par with the national rate of 12.7%. At 51.5%, the vitamin A coverage for children aged 12 to 59 months was the highest in the province and well above the national rate of 42.8%.

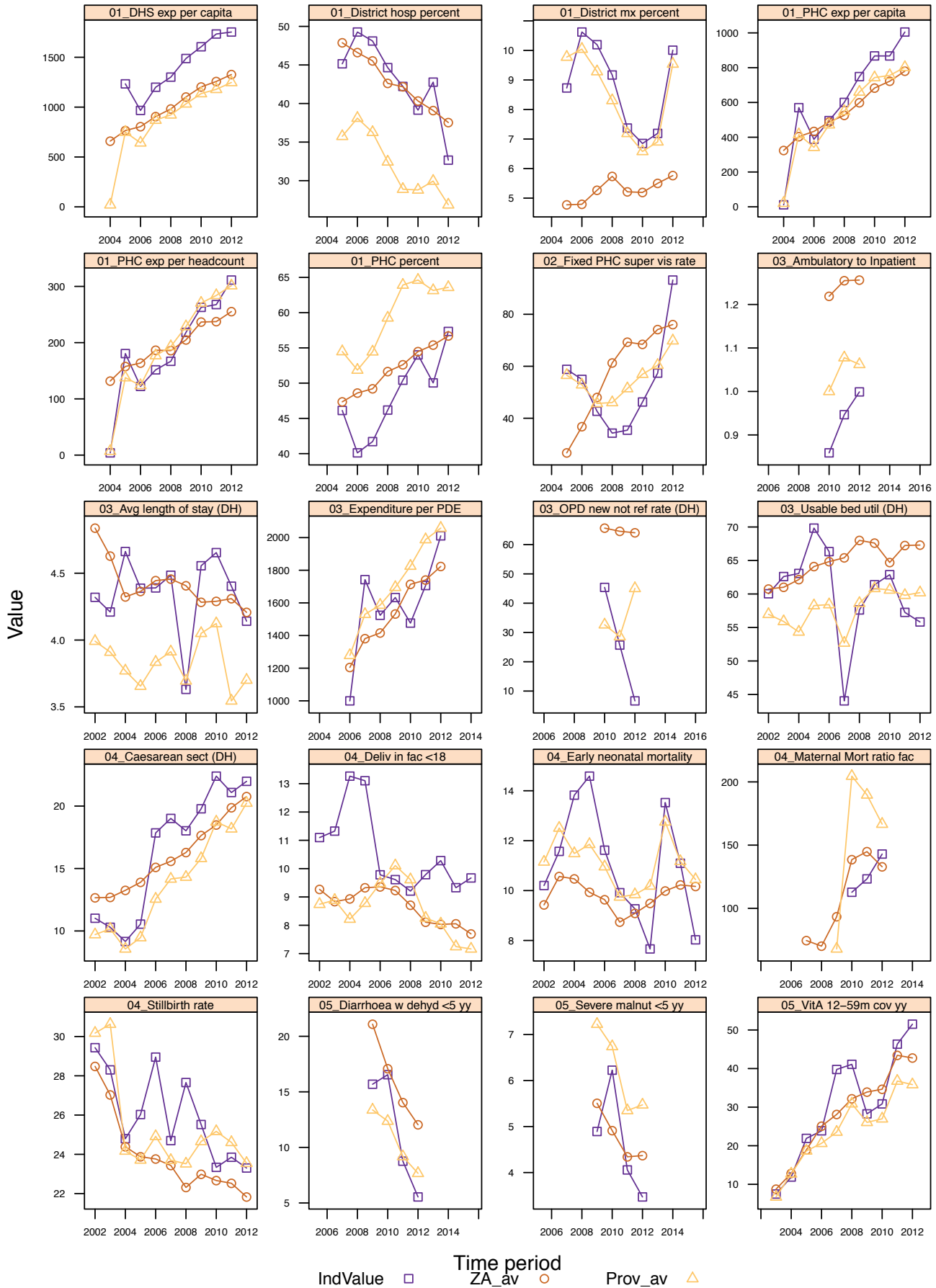
The couple year protection rate increased from 28.7% in 2011/12 to 34.2% in 2012/13. The cervical cancer screening coverage increased from 70.1% in 2011/12 to 83.6% in 2012/13. This was the highest in the province and the fifth highest in the country.

The TB incidence (all cases) was 798.3 per 100 000 people and decreased annually from 2010 when it was 1 025.1. However, it was above the national average of 687.3 per 100 000 people. The TB case finding index was 2.6%. The number of cases diagnosed with TB (new pulmonary smear-positive) increased slightly from 1 478 in 2011 to 1 491, and the TB incidence (new pulmonary smear-positive) increased from 323.9 per 100 000 to 326.5 and was above the national incidence of 235.7. The TB (new pulmonary smear-positive) cure rate was 75.8%, the highest rate in the province. The new TB (new pulmonary smear-positive) defaulter rate was 5.3%, the lowest in the province, and the TB treatment success rate (all TB) was also the highest provincially at 70.5%.

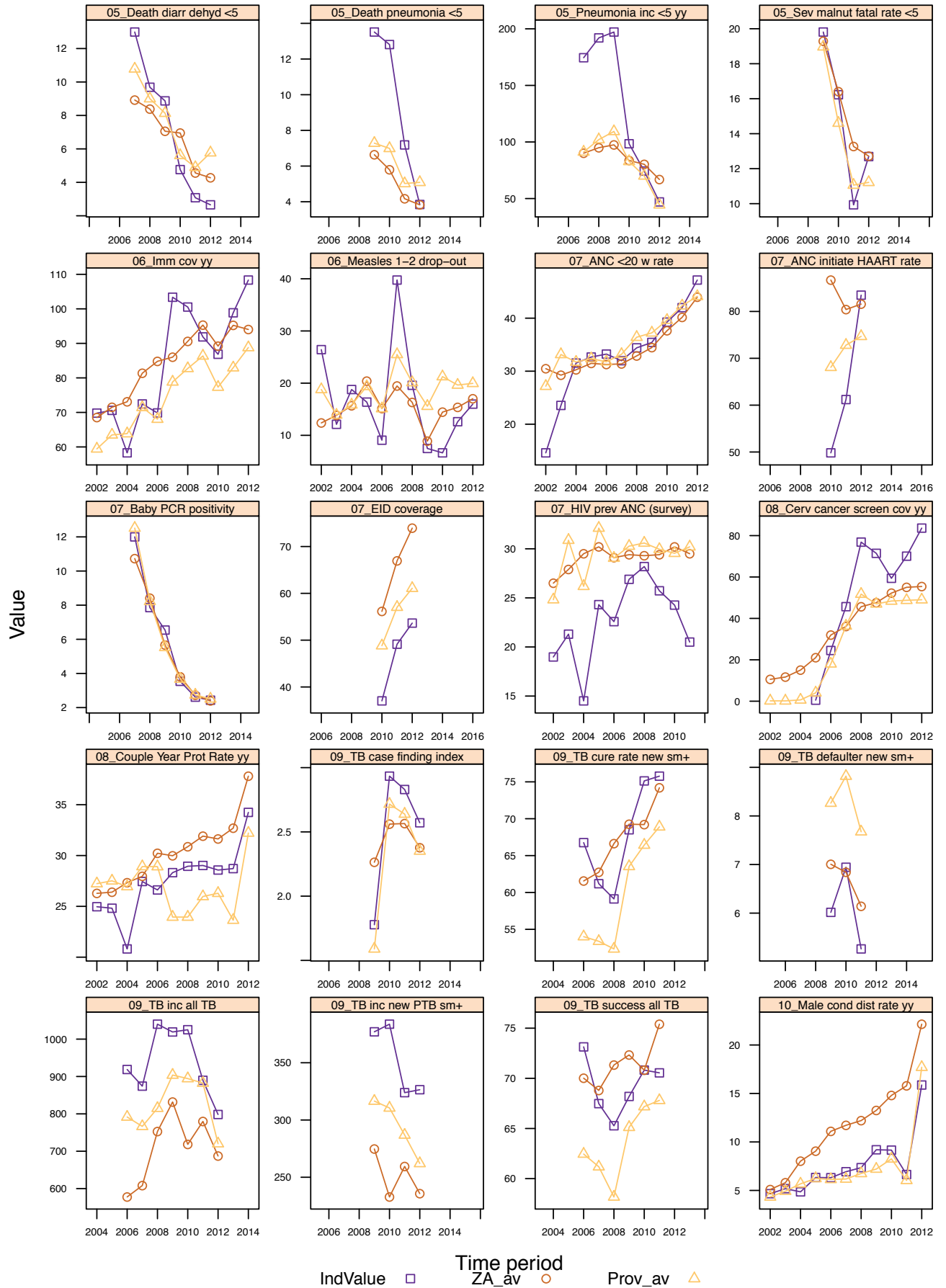
The male condom distribution coverage increased from 6.6 condoms per year per male 15 years and older in 2011/12 to 15.9 in 2012/13, but was still below the national coverage of 22.1 condoms.

The total number of adults remaining on ART at the end of the month increased from 8 299 at the end of 2011/12 to 13 559 by the end of 2012/13, and the total number of children under 15 years remaining on ART at the end of the month increased from 94 to 294 in the same period.

Annual indicators for district: RS Mompoti: DC39



Annual indicators for district: RS Mompoti: DC39



Dr Kenneth Kaunda District Municipality

Susan Naude

Dr Kenneth Kaunda District in North West Province has an estimated medical scheme coverage of 23.7%, the highest in the province. The district is also one of the 11 National Health Insurance (NHI) pilot districts.

The proportion of total district expenditure on district management at 12.8% was the second highest in the country and the highest of all the NHI districts. The percentage expenditure on district hospital services was 17.9%, the lowest in the province, second lowest among the NHI districts, and way below the national average of 30.4%. However, the district has only two district hospitals compared to the other districts in the province where there are more hospitals. The proportion of district health services expenditure on primary health care (PHC) was 69.3%, the highest in the province and above the national average of 56.7%.

The PHC supervisor visit rate (fixed clinic/CHC/CDC) increased from 62.5% in 2011/12 to 68.8% in 2012/13, but it is still below the national average of 76.0%.

In terms of inpatient facility care, the inpatient bed utilisation rate was 74.6%. The average length of stay of 3.2 days was just shorter than the national target of 3.5 days and shorter than the average of 4.2 days for all district hospitals in the country. The expenditure per patient day equivalent of R1 987 was just above the national average of R1 823. The ratio of ambulatory to inpatient days was 0.7, the fourth lowest in the country, the lowest among the NHI districts, and below the national average of 1.3. This indicates that more patients are admitted as inpatients than are seen at the emergency unit and/or outpatient department. The OPD new client (not referred) rate was the lowest in the country at 6.1%, and far below the national average of 64.1%. This had dropped from 8.7% in 2011/12, and indicates that a low percentage of clients bypass the PHC services.^a

The delivery in facility under 18 years rate was 6.2%, and was the second lowest of all NHI districts. At 12.4%, the delivery by Caesarean section rate was the lowest in the province and the second lowest among the NHI districts, whereas the norm for district hospitals in South Africa should be around 15%. More than half of the deliveries in this district take place in regional hospitals, where the Caesarean section rate was 39.6%. The stillbirth in facility rate has decreased over the past four years from 26.8 per 1 000 births to 21.9 per 1 000 births, and was the lowest in the North West Province. The inpatient early neonatal death rate was 14.0 per 1 000 live births, being above the national average of 10.2 per 1 000 live births, the highest in the province as well as the second highest among the NHI districts. The facility maternal mortality ratio was 222.3 per 100 000 live births, the highest in the province, second highest among the NHI districts, and well above the national average of 132.9 per 100 000 live births.

The antenatal 1st visit before 20 weeks rate of 39.3% was the lowest in the province and lower than the national average of 44.0%. The 2011 National Antenatal Sero-prevalence Survey shows a one percentage point decrease in the HIV prevalence among antenatal clients tested, from 37.0% in 2010 to 36.0% in 2011. However, it was still the highest provincially. The antenatal client initiated on ART rate was 89.3%, which was above the national rate of 81.6%.

Data from the National Health Laboratory Services (NHLS) showed that the early infant HIV diagnosis coverage was 60.3%. This was the second lowest coverage among the NHI districts. The proportion of PCR tests HIV positive for infants under two months of age (NHLS data) of 2.9% was lower than the DHIS value of 3.5% for infant 1st PCR test positive around 6 weeks rate.

The immunisation coverage under 1 year at 69.6% in 2012/13 was the lowest in the country. The measles 1st to 2nd dose drop-out rate was 19.3% and was above the national rate of 17.0%.

The child under 5 year diarrhoea with dehydration incidence of 6.2 episodes per 1 000 children was well below the national average of 12.0 per 1 000 children, and was also the lowest among the NHI districts. The child under 5 year diarrhoea case fatality rate showed an increase from 4.3% in 2011/12 to 7.0% in 2012/13, and was above the national average of 4.3%. The child under 5 year pneumonia incidence was 41.7 cases per 1 000 children in Dr Kenneth Kaunda District, better than the national average of 66.9. This had decreased from 99.7 per 1 000 children in 2009/10. The child under 5 years pneumonia case fatality rate was 4.5%. The child under 5 years severe acute malnutrition incidence was 6.5 cases per 1 000 children, while the child under 5 years severe acute malnutrition case fatality rate of 8.7% was the lowest in the province and also lower than the national average of 12.7%. The vitamin A coverage for children aged 12 to 59 months was 31.7%.

The district underperformed in the couple year protection rate. The national target is 35% with a national average of 37.8% against the 26.9% of this district; however, it did increase by 6.1 percentage points from 2011/12. This was the second lowest performance of the NHI districts. The cervical cancer screening coverage was 55.2%, an increase of 10 percentage points over the past year and in line with the national coverage of 55.4%.

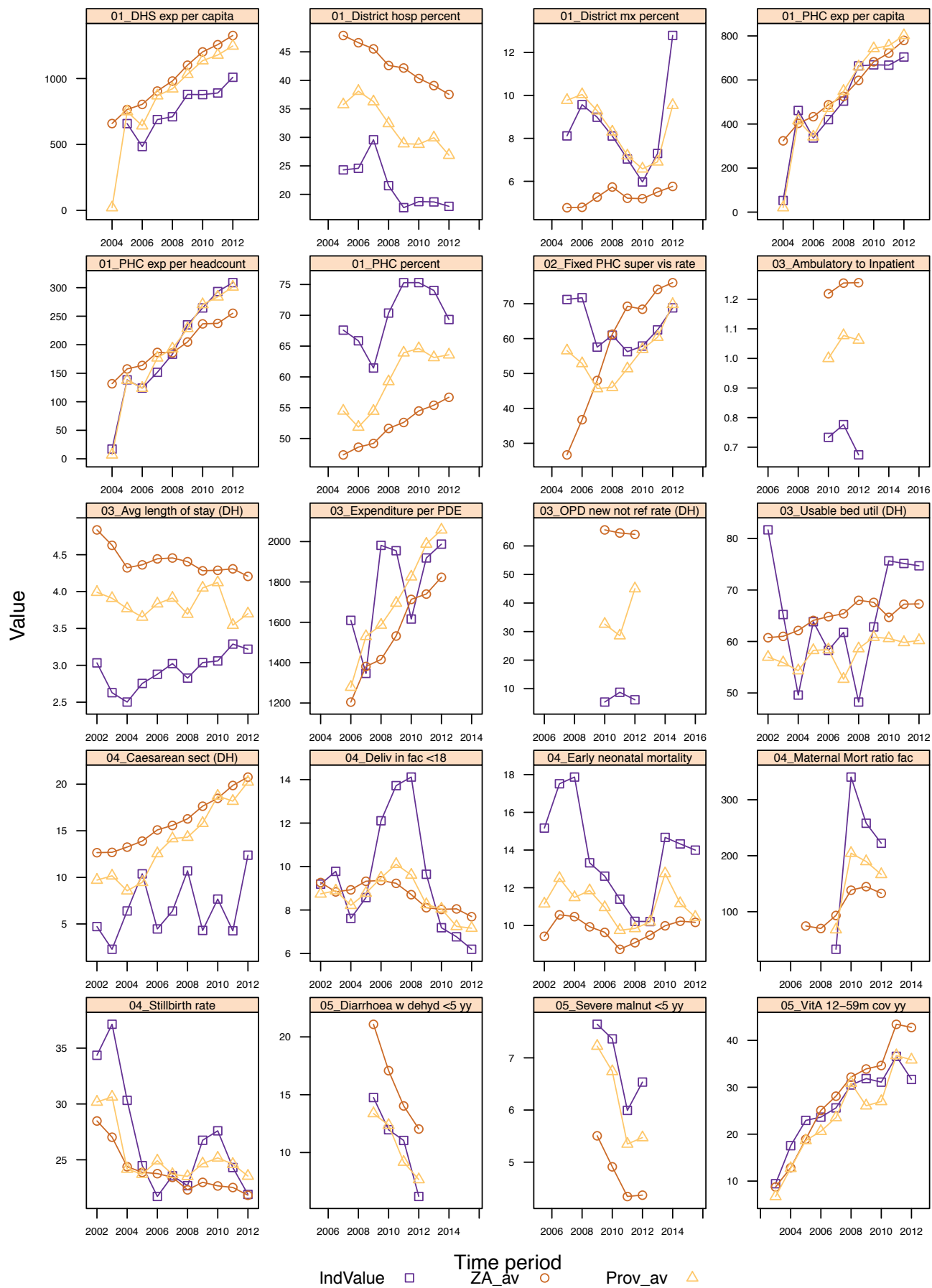
The TB incidence (all cases) was 936.7 per 100 000 people. This was the highest in the province and above the national average of 687.3 per 100 000 people. The TB case finding index was 3.2% and was the highest in the province. The number of

^a There is no obvious data quality problem, although the rate is almost zero in Nic Bodenstein Hospital, but between 25 and 60% in Ventersdorp Hospital.

cases diagnosed with TB (new pulmonary smear-positive) decreased from 2 947 in 2011 to 2 670, and the TB incidence (new pulmonary smear-positive) decreased from 365.1 per 100 000 people to 328.6, but it was above the national incidence of 235.7. The TB cure rate (new pulmonary smear-positive) was 69.9%. The TB defaulter rate (new pulmonary smear-positive) was 7.6%, being above the national rate of 6.1%, and also the second highest among the NHI districts. The TB treatment success rate (all TB) at 68.2% was the second lowest rate among the NHI districts.

There was an increase in male condom distribution coverage from 3.6 condoms per male 15 years and older in 2011/12 to 12.6, but this was still below the national average of 22.1 condoms. The total number of adults remaining on ART at end of the month decreased from 39 673 at the end of 2011/12 to 32 955. Dr Kenneth Kaunda District was the only district in the province with a decrease in this number. The total number of children under 15 years remaining on ART at end of the month increased from 2 572 to 3 028 to in the same period.

Annual indicators for district: Kenneth Kaunda: DC40



Annual indicators for district: Kenneth Kaunda: DC40

