

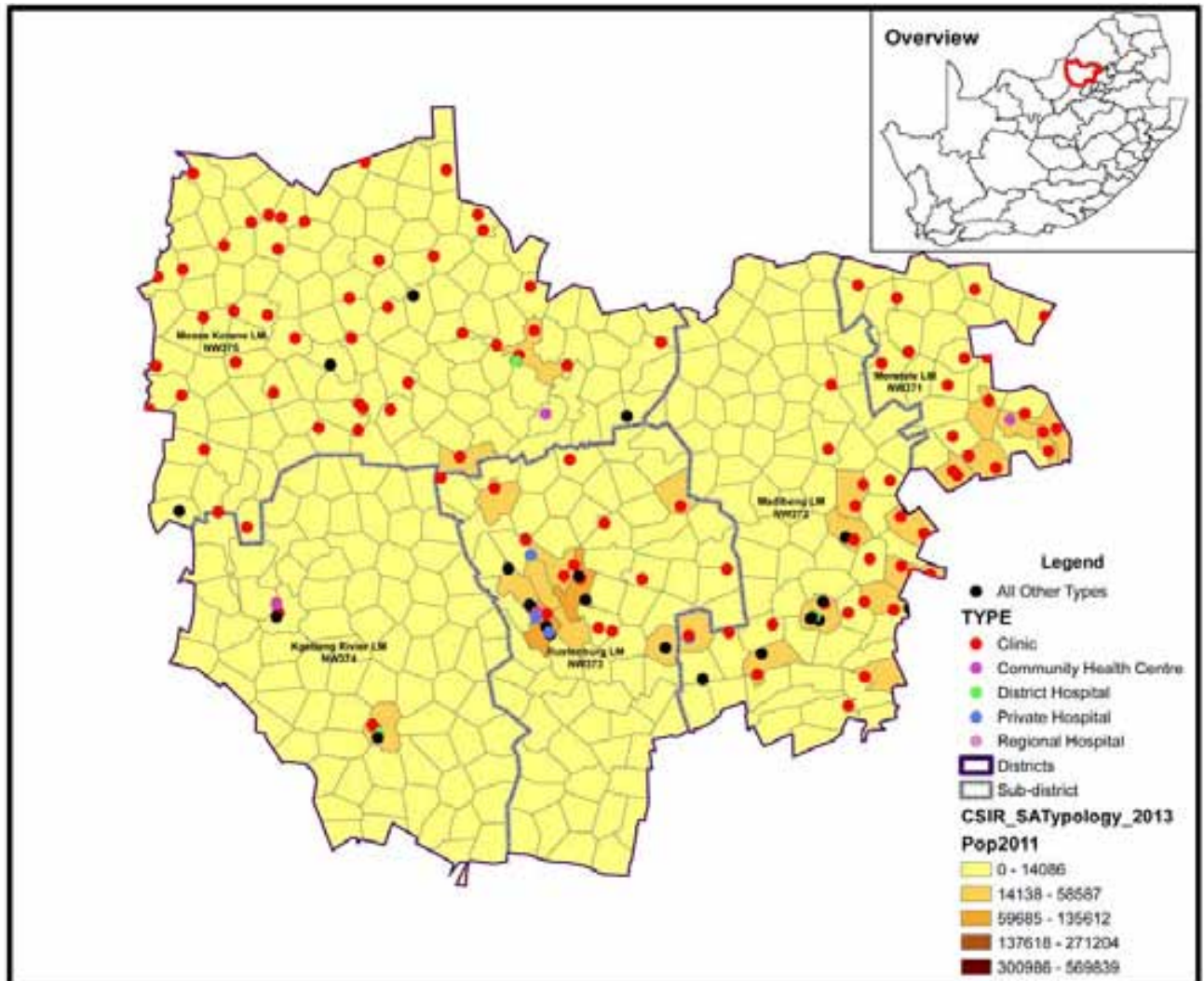
22 North West Province

Bojanala District Municipality (DC37)

Naomi Massyn

Bojanala is situated in North West Province and comprises five sub-districts, namely Kgetlengrivier, Madibeng, Moses Kotane, Moretele and Rustenburg. The district has a population of 1 598 315, with a population density of 87.2 persons per km² and falls in the mid socio-economic quintile, Quintile 3.

Population distribution, sub-district boundaries and health facility locations: Bojanala (DC37)



Burden of disease profile

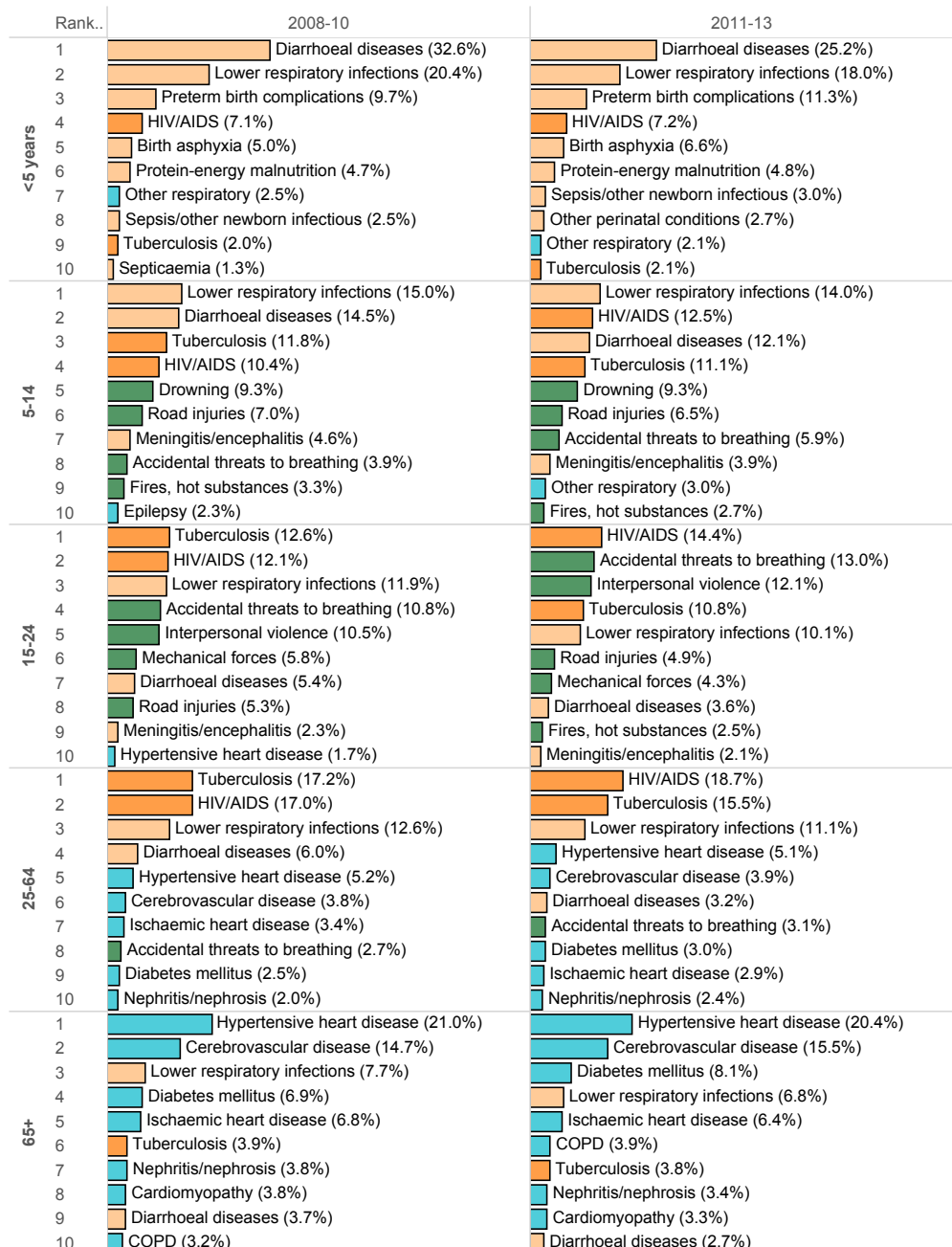
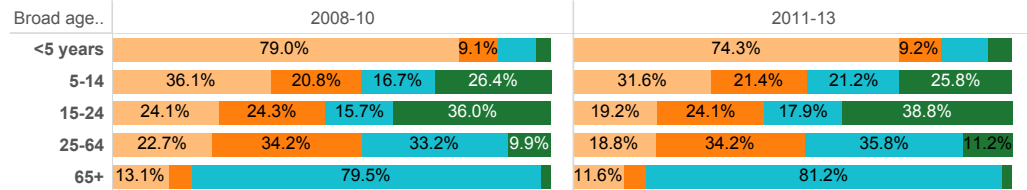
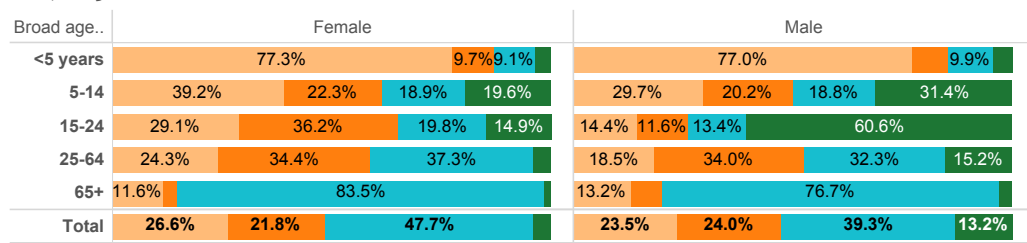
Percentage of deaths by broad cause and leading causes, 2008–2013: Bojanala (DC37)

Percentage of deaths by broad cause and leading causes, 2008-2013

Prov, District
NW, Bojanala: DC37
 Show History

Broadcause
■ Injury
■ NCD
■ HIV and TB
■ Comm_mat_peri_nut

NW, Bojanala: DC37



Broad cause groups by age and gender

In the under-5-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for 77% of deaths.

In the 5–14-year age group, injuries accounted for 19.6% of deaths among females versus 31.4% of deaths among males. There was also gender variation for communicable diseases and maternal, perinatal and nutritional conditions (39.2% among females versus 29.7% among males).

In the 15–24-year age group, injuries accounted for 60.6% of deaths among males versus only 14.9% among females, while HIV and TB mortality was 36.2% among females versus only 11.6% among males.

In the 25–64-year age group, non-communicable diseases accounted for the largest proportion of deaths among females (37.3%), while HIV and TB mortality was highest among males (34.0%). Injuries accounted for a small proportion of deaths in this age group, with the percentage being much higher among males than females (15.2% versus 4.0%).

In the 65-years-and-older age group, non-communicable diseases accounted for the highest proportion of deaths (83.5% among females and 76.7% among males).

Trends in broad cause groups by age

The broad cause groups were relatively unchanged in all age categories between 2008–2010 and 2011–2013.

Trends in leading causes of death by age**Under 5 years**

Diarrhoeal diseases (25.2%), lower respiratory infections, preterm birth complications, HIV and AIDS, birth asphyxia and protein-energy malnutrition remained the leading causes of death in this age group between 2008–2010 and 2011–2013.

5–14 years

Lower respiratory infections, HIV and AIDS, diarrhoeal diseases, TB, drowning and road injuries remained the top six leading causes of death, although the ranking changed. Other causes included accidental threats to breathing (5.9%) and meningitis/encephalitis (3.9%).

15–24 years

HIV and AIDS (14.4%) moved up and became the top leading cause of death in this age group, followed by accidental threats to breathing (13.0%), interpersonal violence (12.1%), TB and lower respiratory infections. Other causes included road injuries, mechanical forces and diarrhoeal diseases.

25–64 years

HIV and AIDS also moved to the top position in this age group, followed by TB, lower respiratory infections, hypertensive heart disease and cerebrovascular disease. Other leading causes of death included diarrhoeal diseases, accidental threats to breathing, diabetes mellitus, ischaemic heart diseases and nephritis/nephrosis.

65 years and older

Hypertensive heart disease (20.4%), cerebrovascular disease (15.5%), diabetes mellitus, lower respiratory infections and ischaemic heart diseases remained the top five leading causes of death in this age group. Other causes included chronic obstructive pulmonary disease, TB, nephritis/nephrosis, cardiomyopathy and diarrhoeal diseases.

Section B: Profile North West Province

Indicator performance: Bojanala (DC37)

Category	Indicator	District value			District ranking 2014/15	Provincial average 2014/15	Provincial target 2014/15	Provincial target 2015/16	National average 2014/15	National target 2014/15	National target 2015/16	
		2012/13	2013/14	2014/15								
Management	PHC supervisor visit rate (fixed clinic/CHC/CDC) [Percentage]	57.7	61.3	71.8	35	76.8	80.0		73.5			
Management Inpatients	Average length of stay (district hospitals) [Days]	3.4	3.3	5.2	18	4.7	3.8		4.6			
	Expenditure per patient day equivalent (district hospitals) [Rand (real 2014/15 prices)]	2 034.7	2 345.4	2 511.9	38	2 274.8			2 136.4			
	Inpatient bed utilisation rate (district hospitals) [Percentage]	81.2	78.4	76.4	8	64.2	65.0		65.8			
	OPD new client not referred rate (district hospitals) [Percentage]	72.5	41.8	30.3	8	47.9			60.7			
	Child under 5 years diarrhoea case fatality rate [Percentage]	11.3	5.9	6.3	48	3.4	5.0		3.3	3.5	3.0	
Mortality Inpatients	Child under 5 years pneumonia case fatality rate [Percentage]	7.7	6.2	4.8	43	3.6	5.0		2.9			
	Child under 5 years severe acute malnutrition case fatality rate [Percentage]	17.5	15.6	18.3	45	12.3	10.0		11.6	8.0	7.0	
	Inpatient crude death rate [Percentage]	7.0	6.4	7.9	51	6.6			5.2			
	Delivery by Caesarean section rate (district hospitals) [Percentage]	23.5	23.6	27.6		27.9			22.7			
Delivery	Delivery in facility under 18 years rate [Percentage]	6.3	6.1	6.0	9	6.9	10.0		7.4			
	Inpatient early neonatal death rate [per 1 000 live births]	9.4	6.8	9.5	22	10.8			10.1		0	
	Maternal mortality in facility ratio [per 100 000 live births]	164.1	160.5	156.5	35	167.1	180.0		132.5	100	80.0	
	Mother postnatal visit within 6 days rate [Percentage]	93.6	85.6	87.6	6	74.7			74.3	80.0	85.0	
	Stillbirth in facility rate [per 1 000 births]	24.0	21.7	24.2	40	22.8			20.7			
	PMTCT	Antenatal 1st visit before 20 weeks rate [Percentage]	42.1	48.7	52.5	40	54.3	60.0		53.9	65.0	70.0
		Antenatal client initiated on ART rate [Percentage]	62.8	79.7	86.1	45	90.2			91.2	93.0	96.0
Infant 1st PCR test around 6 weeks uptake rate [Percentage]		110.4	123.8	111.8	11	100.1			100.6			
Infant 1st PCR test positive around 6 weeks rate [Percentage]		2.4	2.5	1.5	24	1.8	2.0		1.5	1.8	2.0	
Child Health	School Grade 1 screening coverage [Percentage]		12.9	38.7	9	38.2	70.0		23.2	30.0	35.0	
	Vitamin A dose 12-59 months coverage [Percentage]	20.0	28.8	43.7	43	52.2	55.0		52.2	55.0		
Immunisation	Immunisation coverage under 1 year [Percentage]	69.0	68.9	78.1	42	82.1	92.0		89.8	95.0	91.0	
	Measles 2nd dose coverage [Percentage]	53.5	56.0	70.9	46	77.7	95.0		82.8	85.0	85.0	
Reproductive health	Cervical cancer screening coverage [(Percentage)]	35.7	55.9	64.1	18	65.8	70.0		54.5	60.0	64.0	
	Couple year protection rate [Percentage]	26.0	32.2	35.5	47	42.7	37.0		46.8	55.0		
TB case finding	TB Rifampicin resistance confirmed client rate [Percentage]	5.3	5.9	5.6	23	5.2			6.4			
HIV	HIV testing coverage (including ANC)		28.1	32.1	31	35.2			32.1			
	Male condom distribution coverage	13.8	20.0	19.5	47	28.1			38.4			
Non-communicable diseases	Hypertension incidence [per 1 000]	15.5	19.0	13.9		13.9	20.0		13.9			
	Mental health admission rate [Percentage]		0.8	1.1		1.5	1.2		1.2			
Human Resources	PHC doctor clinical workload [Clients per doctor per day]	16.1	18.7	16.3	41	16.1			26.9			
	PHC professional nurse clinical workload [Clients per nurse per day]	24.7	22.5	23.9	30	22.9			29.4			

Category	Indicator	District value				District ranking 2013	Provincial average 2013	Provincial target 2013	Provincial target 2014	National average 2013	National target 2013	National target 2014
		2011	2012	2013	2014							
TB case finding	Incidence (diagnosed cases) of TB - all types [Cases per 100 000 population]		553.1	563.3	466.4	11	568.8			592.5		
TB treatment outcomes	TB cure rate (new smear positive) [Percentage]	66.9	68.4	72.1		35	69.0			76.8		
	TB death rate (all TB) [Percentage]	11.3	11.3	9.1		33	10.2			7.4	6.0	5.0
	TB defaulter rate (new smear positive) [Percentage]	8.7	6.6	6.6		36	7.1	5.0		5.8	6.0	5.5
	TB treatment success rate (all TB) [Percentage]	66.8	67.4	65.5		46	65.8	82.0		77.9	82.0	83.0
HIV	Percentage of TB cases with known HIV status (ETR.Net) [Percentage]		86.2	90.8	93.7	23	91.7			92.8		
	TB/HIV co-infected client on ART rate (ETR.Net) [Percentage]		54.1	69.8	66.3	41	75.4			78.9		
NCDs	Hypertension prevalence rate (crude) [Percentage]		31.2			18	35.6			31.8		
Burden of disease	Percentage of deaths garbage codes [Percentage]	15.2	15.5	14.0		33	14.0			14.5		
	Percentage of deaths ill-defined [Percentage]	18.2	17.2	14.9		38	14.4			14.0		
	Percentage of YLLs due to communicable, maternal, perinatal, nutrition causes [Percentage]	27.3	26.3	26.3		39	27.2			22.1		
	Percentage of YLLs due to HIV and TB [Percentage]	27.8	27.0	25.6		20	28.1			27.9		
	Percentage of YLLs due to injuries [Percentage]	10.9	12.1	12.0		20	10.3			13.1		
	Percentage of YLLs due to non-communicable diseases [Percentage]	34.0	34.7	36.1		27	34.4			36.9		

Value in red – improvement strategies are urgently needed

Value highlighted in yellow – performance is ranked among the 10 best in the country

Value highlighted in red – performance is ranked among the 10 worst in the country

The district performed very well with regard to some indicators, which ranked among the 10 best in the country in the last reporting period. These indicators were:

- ◆ Inpatient bed utilisation rate (district hospitals)
- ◆ OPD new client not referred rate (district hospitals)
- ◆ Delivery in facility under 18 years rate
- ◆ Mother postnatal visit within 6 days rate
- ◆ School Grade 1 screening coverage (although below the provincial target)

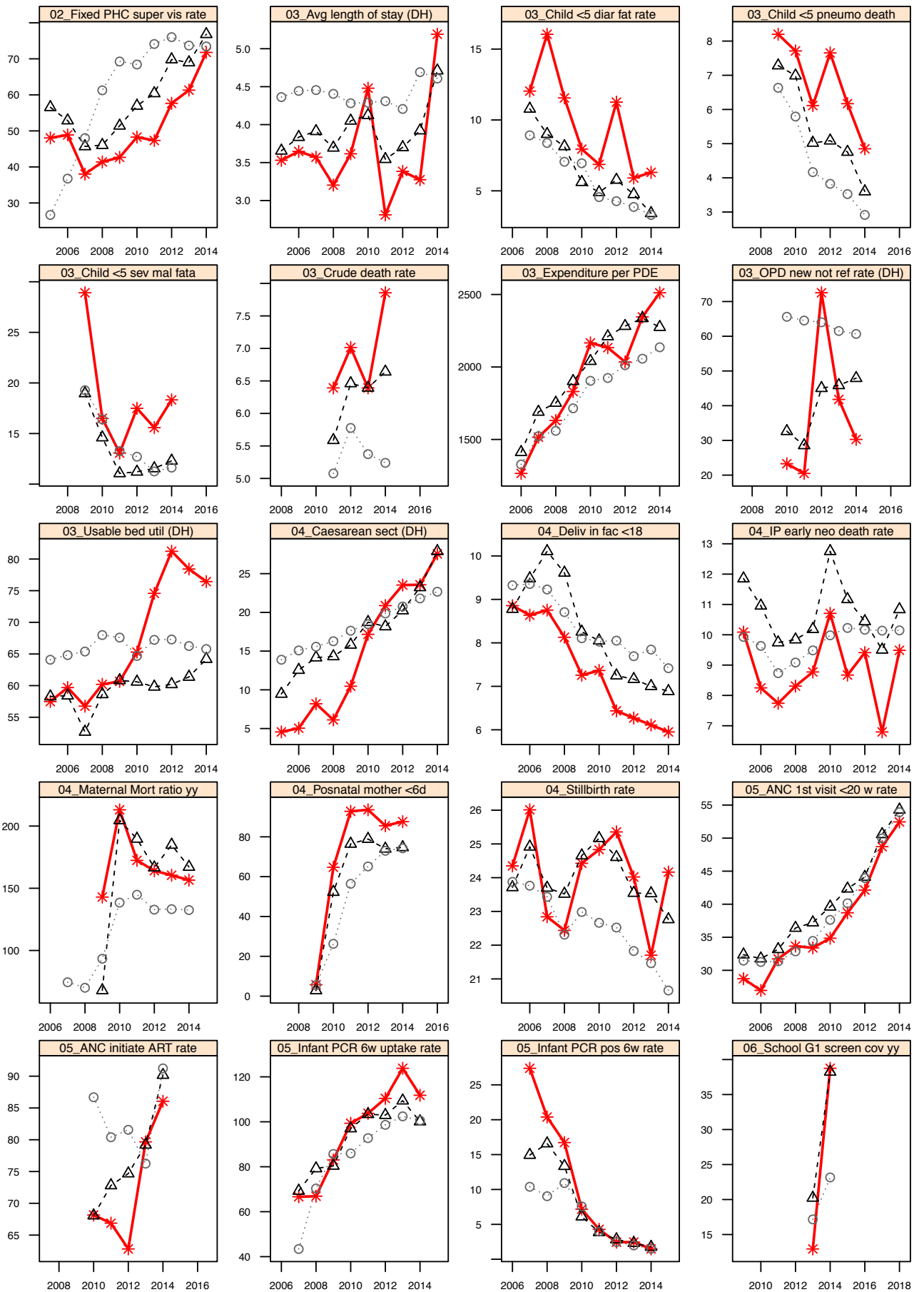
However, the performance of 10 indicators ranked among the 10 worst in the country. These indicators were:

- ◆ Child under 5 years diarrhoea case fatality rate
- ◆ Child under 5 years pneumonia case fatality rate
- ◆ Child under 5 years severe acute malnutrition case fatality rate
- ◆ Inpatient crude death rate (second highest in the country)
- ◆ Antenatal client initiated on ART rate
- ◆ Vitamin A dose 12–59 months coverage
- ◆ Measles 2nd dose coverage
- ◆ Couple year protection rate
- ◆ Male condom distribution coverage
- ◆ TB treatment success rate (all TB)

Although the district recorded an improvement in the performance of several indicators over the past three years, improvement strategies are needed urgently for the following indicators, especially when compared with the district ranking, 2014/15 provincial and national averages, and the 2014/15 and 2015/16 provincial and national targets. These indicators are:

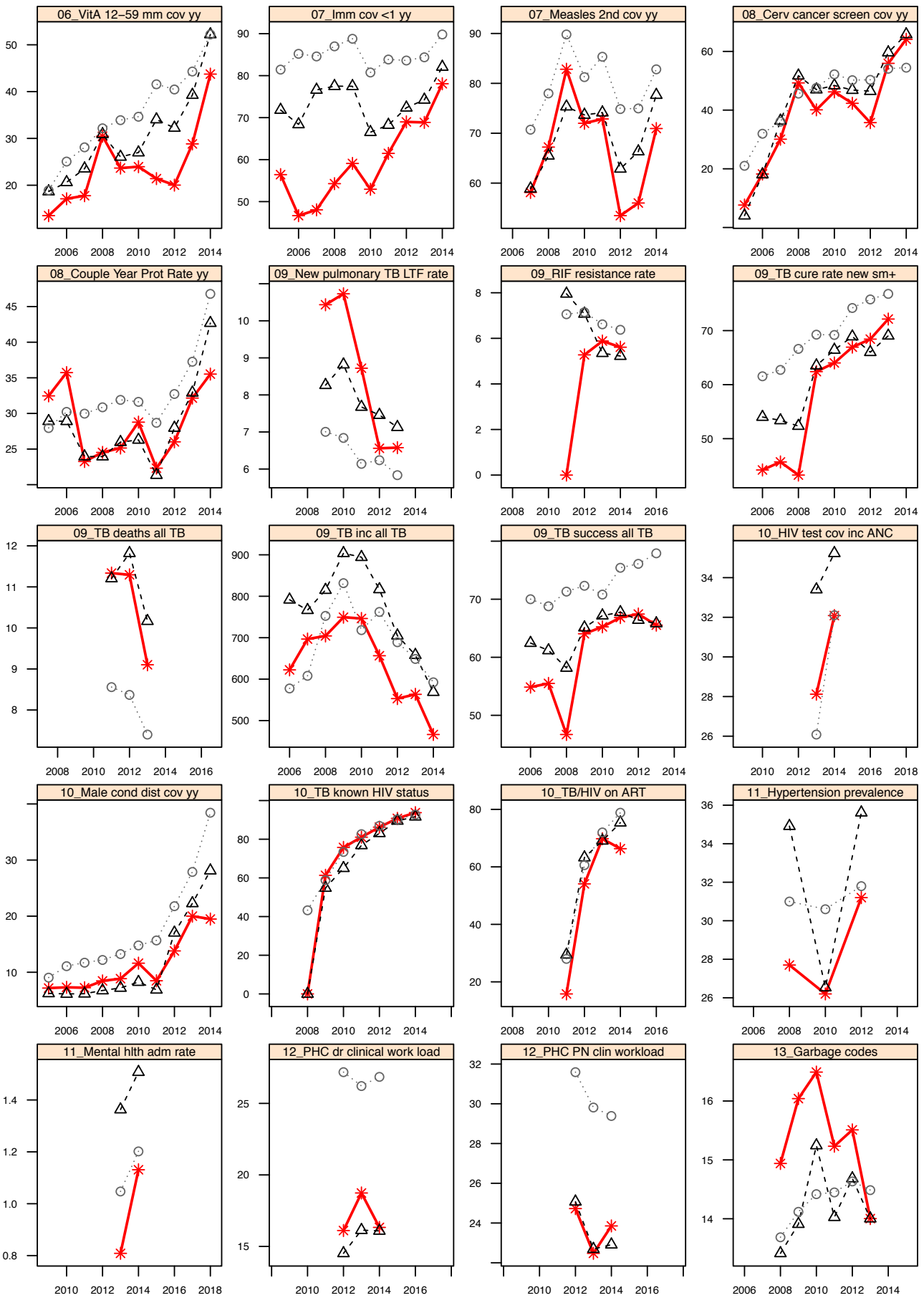
- ◆ PHC supervisor visit rate (fixed clinic/CHC/CDC)
- ◆ Average length of stay (district hospitals)
- ◆ Expenditure per patient day equivalent (district hospitals)
- ◆ Child under 5 years diarrhoea case fatality rate
- ◆ Child under 5 years pneumonia case fatality rate
- ◆ Child under 5 years severe acute malnutrition case fatality rate
- ◆ Inpatient crude death rate
- ◆ Delivery by Caesarean section rate (district hospitals)
- ◆ Maternal mortality in facility ratio
- ◆ Stillbirth in facility rate
- ◆ Antenatal 1st visit before 20 weeks rate
- ◆ Antenatal client initiated on ART rate
- ◆ School Grade 1 screening coverage
- ◆ Vitamin A dose 12–59 months coverage
- ◆ Immunisation coverage under 1 year
- ◆ Measles 2nd dose coverage
- ◆ Cervical cancer screening coverage
- ◆ Couple year protection rate
- ◆ Male condom distribution coverage
- ◆ PHC doctor and professional nurse clinical workloads
- ◆ TB cure rate (new smear positive)
- ◆ TB death rate (all TB)
- ◆ TB defaulter rate (new smear positive)
- ◆ TB treatment success rate (all TB)
- ◆ TB/HIV co-infected client on ART rate
- ◆ Percentage of deaths ill-defined
- ◆ Percentage of years of life lost due to communicable, maternal, perinatal, nutrition causes

Annual indicators for district: Bojanala (DC37)



District value * Provincial average Δ ZA (national) average ○

Annual indicators for district: Bojanala (DC37)



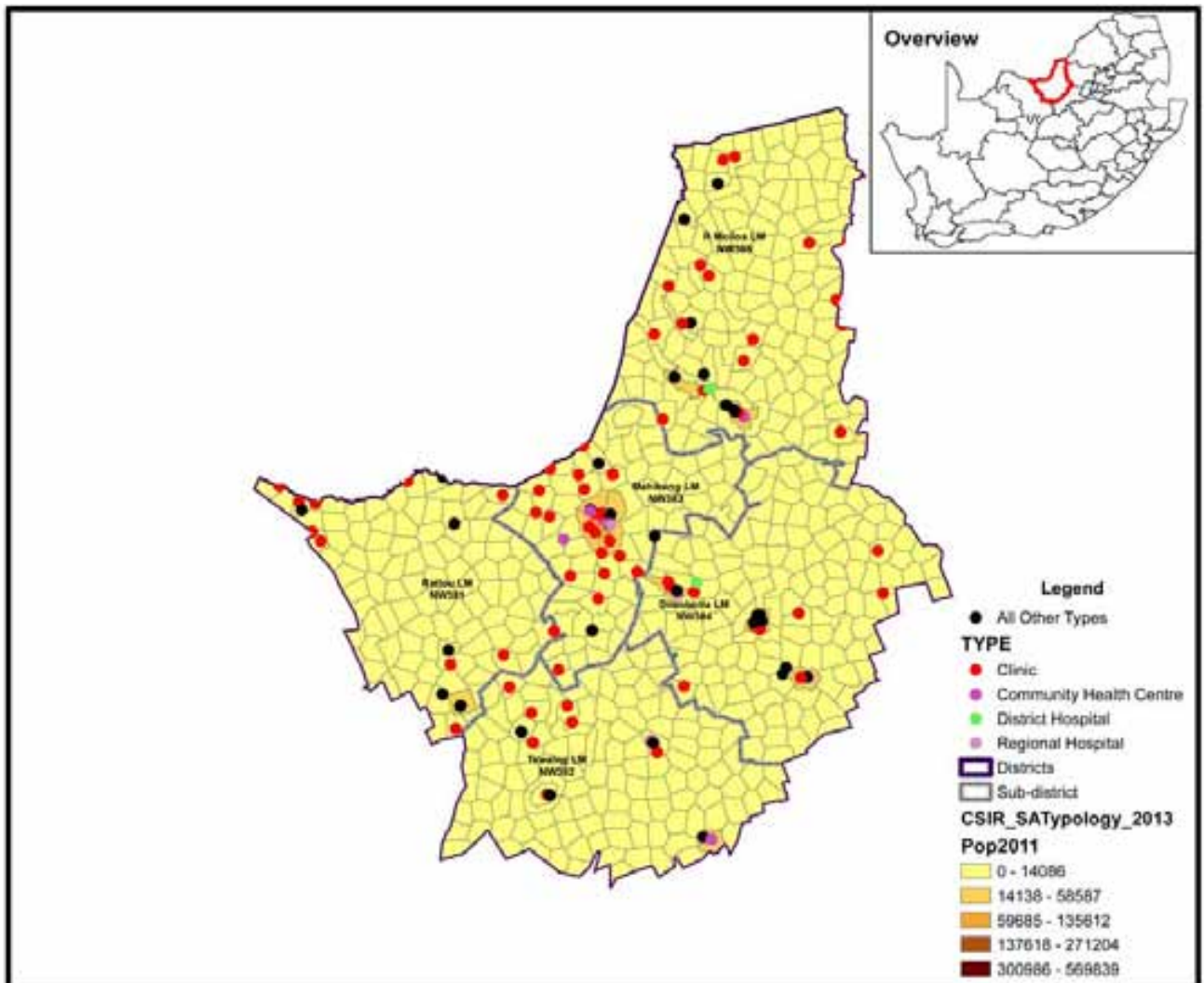
District value * Provincial average Δ ZA (national) average ○

NM Molema District Municipality (DC38)

Naomi Massyn

NM Molema District is situated in North West Province and comprises five sub-districts, namely Ditsobotla, Mahikeng, R Moiloa, Ratlou and Tswaing. It borders Botswana to the north. The district has a population of 860 638, with a population density of 30.5 persons per km² and falls into socio-economic Quintile 2.

Population distribution, sub-district boundaries and health facility locations: NM Molema (DC38)



Burden of disease profile

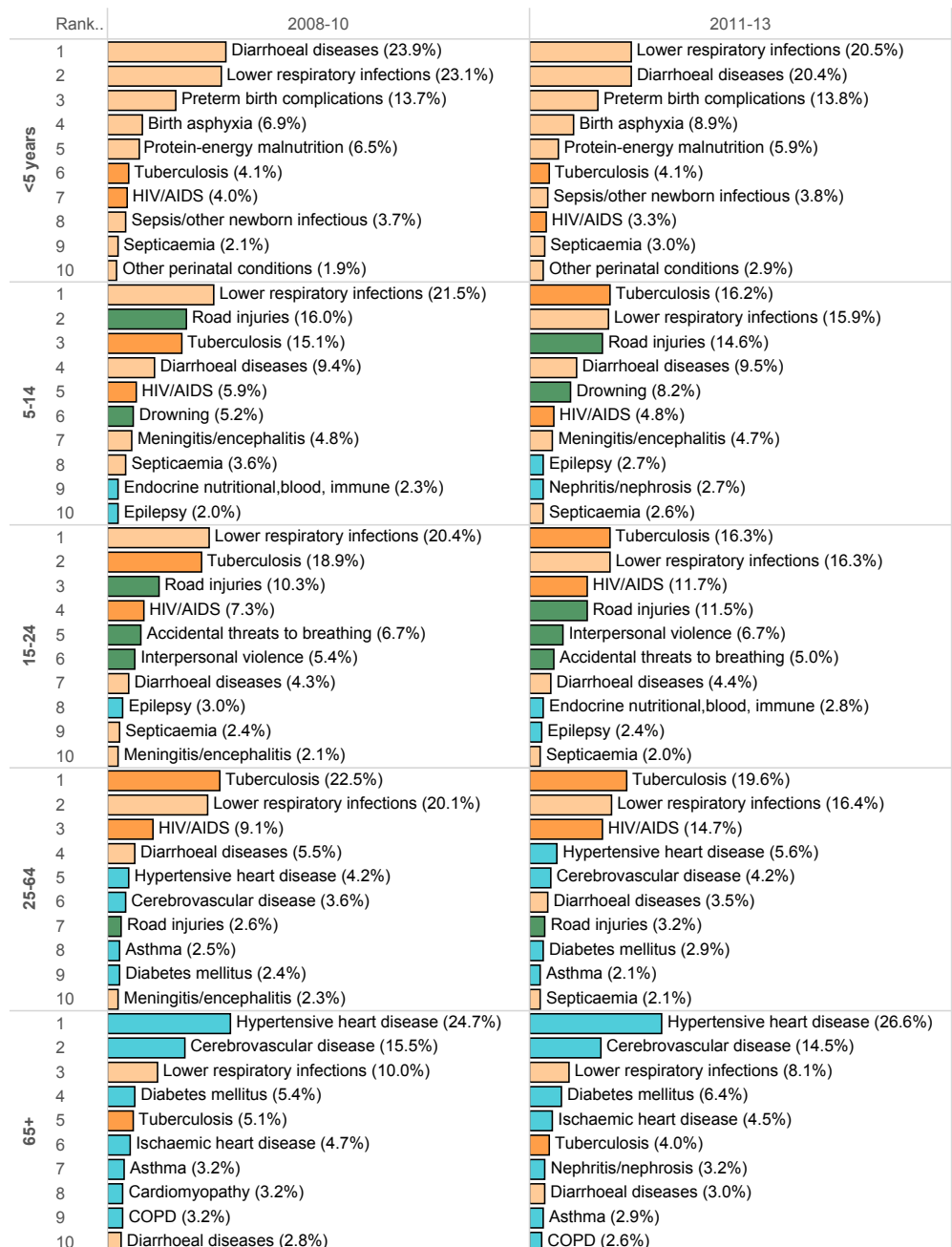
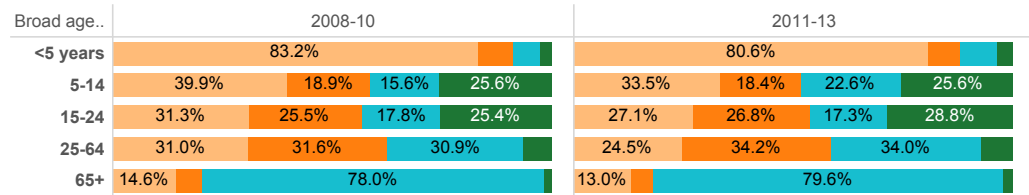
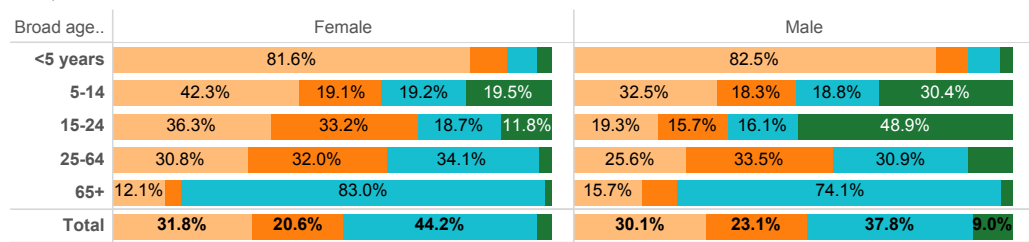
Percentage of deaths by broad cause and leading causes, 2008–2013: NM Molema (DC38)

Percentage of deaths by broad cause and leading causes, 2008-2013

NW, NM Molema: DC38

Prov, District
NW, NM Molema: DC38
 Show History

Broadcause
■ Injury
■ NCD
■ HIV and TB
■ Comm_mat_peri_nut



Broad cause groups by age and gender

In the under-5-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for around 82% of deaths.

In the 5–14-year age group, injuries accounted for 19.5% of deaths among females versus 30.4% of deaths among males. There was also a gender difference for communicable diseases and maternal, perinatal and nutritional conditions (42.3% of deaths among females versus 32.5% among males).

In the 15–24-year age group, injuries accounted for 48.9% of deaths among males versus only 11.8% among females, while HIV and TB mortality was 33.2% among females versus only 15.7% among males. Communicable diseases and maternal, perinatal and nutritional conditions accounted for 36.3% of deaths among females versus 19.3% of deaths among males.

In the 25–64-year age group, non-communicable diseases accounted for the largest proportion of deaths among females (34.1%), while HIV and TB mortality was highest among males (33.5%).

In the 65-years-and-older age group, non-communicable diseases accounted for the highest proportion of deaths (83.0% among females and 74.1% among males).

Trends in broad cause groups by age

In children under 5 years, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased slightly from 83.2% to 80.6% between 2008–2010 and 2011–2013. In the 5–14-year age group, non-communicable disease mortality increased from 15.6% to 22.6%, while deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 39.9% to 33.5%. In the 15–24-year group, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased slightly from 31.3% to 27.1%, while injury-related deaths increased from 25.4% to 28.8%. In the 25–64-year age group, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 31.0% to 24.5%, while HIV and TB mortality increased from 31.6% to 34.2% and non-communicable disease mortality increased from 30.9% to 34.0%. In the 65-years-and-older age group there was not much change over the period.

Trends in leading causes of death by age

Under 5 years

Lower respiratory infections (20.5%), diarrhoeal diseases (20.4%), preterm birth complications, birth asphyxia, protein-energy malnutrition and TB remained the leading causes of death in this age group between 2008–2010 and 2011–2013. HIV and AIDS remained one of the top 10 causes of death, but moved down one position.

5–14 years

Tuberculosis moved up to become the top leading cause of death in this age group, followed by lower respiratory infections, road injuries, diarrhoeal diseases, drowning and HIV and AIDS.

15–24 years

Tuberculosis moved up to become the top leading cause of death in this age group, followed by lower respiratory infections, HIV and AIDS, road injuries and interpersonal violence. Other causes included accidental threats to breathing, diarrhoeal diseases, and endocrine, nutritional, blood and immune diseases.

25–64 years

Tuberculosis, lower respiratory infections and HIV and AIDS remained the top three causes of death in this age group.

65 years and older

Hypertensive heart disease (26.6%), cerebrovascular disease, lower respiratory infections and diabetes mellitus remained the top four leading causes of death in this age group. Other causes included ischaemic heart diseases, TB, nephritis/nephrosis, diarrhoea, asthma and chronic obstructive pulmonary disease.

Section B: Profile North West Province

Indicator performance: NM Molema (DC38)

Category	Indicator	District value			District ranking 2014/15	Provincial average 2014/15	Provincial target 2014/15	Provincial target 2015/16	National average 2014/15	National target 2014/15	National target 2015/16
		2012/13	2013/14	2014/15							
Management PHC	PHC supervisor visit rate (fixed clinic/CHC/CDC) [Percentage]	70.8	65.6	77.2	28	76.8	80.0		73.5		
Management Inpatients	Average length of stay (district hospitals) [Days]	3.9	4.0	4.3	8	4.7	3.8		4.6		
	Expenditure per patient day equivalent (district hospitals) [Rand (real 2014/15 prices)]	2 688.2	2 551.1	2 256.5	16	2 274.8			2 136.4		
	Inpatient bed utilisation rate (district hospitals) [Percentage]	47.6	49.2	55.5	45	64.2	65.0		65.8		
	OPD new client not referred rate (district hospitals) [Percentage]	45.5	58.0	59.5	26	47.9			60.7		
Mortality Inpatients	Child under 5 years diarrhoea case fatality rate [Percentage]	4.4	4.5	3.6	32	3.4	5.0		3.3	3.5	3.0
	Child under 5 years pneumonia case fatality rate [Percentage]	4.4	4.5	3.8	36	3.6	5.0		2.9		
	Child under 5 years severe acute malnutrition case fatality rate [Percentage]	9.4	10.4	9.9	21	12.3	10.0		11.6	8.0	7.0
	Inpatient crude death rate [Percentage]	6.5	6.6	6.6	46	6.6			5.2		
Delivery	Delivery by Caesarean section rate (district hospitals) [Percentage]	19.4	24.5	34.9		27.9			22.7		
	Delivery in facility under 18 years rate [Percentage]	7.7	7.2	7.6	21	6.9	10.0		7.4		
	Inpatient early neonatal death rate [per 1 000 live births]	10.5	9.0	10.7	29	10.8			10.1		0
	Maternal mortality in facility ratio [per 100 000 live births]	141.4	206.9	153.8	34	167.1	180.0		132.5	100	80.0
	Mother postnatal visit within 6 days rate [Percentage]	69.0	61.4	70.0	24	74.7			74.3	80.0	85.0
	Stillbirth in facility rate [per 1 000 births]	24.3	21.6	18.4	16	22.8			20.7		
PMTCT	Antenatal 1st visit before 20 weeks rate [Percentage]	50.2	53.6	54.7	34	54.3	60.0		53.9	65.0	70.0
	Antenatal client initiated on ART rate [Percentage]	84.5	75.1	97.0	9	90.2			91.2	93.0	96.0
	Infant 1st PCR test around 6 weeks uptake rate [Percentage]	97.6	99.4	86.9	44	100.1			100.6		
	Infant 1st PCR test positive around 6 weeks rate [Percentage]	2.7	2.5	1.8	34	1.8	2.0		1.5	1.8	2.0
Child Health	School Grade 1 screening coverage [Percentage]		15.8	32.6	14	38.2	70.0		23.2	30.0	35.0
	Vitamin A dose 12-59 months coverage [Percentage]	49.6	55.5	66.4	7	52.2	55.0		52.2	55.0	
Immunisation	Immunisation coverage under 1 year [Percentage]	68.6	72.2	82.8	27	82.1	92.0		89.8	95.0	91.0
	Measles 2nd dose coverage [Percentage]	72.0	79.4	88.3	12	77.7	95.0		82.8	85.0	85.0
Reproductive health	Cervical cancer screening coverage [(Percentage)]	36.9	53.4	66.9	12	65.8	70.0		54.5	60.0	64.0
	Couple year protection rate [Percentage]	31.4	35.0	51.0	17	42.7	37.0		46.8	55.0	
TB case finding	TB Rifampicin resistance confirmed client rate [Percentage]	6.8	4.4	4.7	11	5.2			6.4		
HIV	HIV testing coverage (including ANC)		40.8	41.6	12	35.2			32.1		
	Male condom distribution coverage	24.7	28.4	38.2	23	28.1			38.4		
Non-communicable diseases	Hypertension incidence [per 1 000]	14.7	17.9	14.5		13.9	20.0		13.9		
	Mental health admission rate [Percentage]		1.4	1.7		1.5	1.2		1.2		
Human Resources	PHC doctor clinical workload [Clients per doctor per day]	18.0	16.1	19.0	29	16.1			26.9		
	PHC professional nurse clinical workload [Clients per nurse per day]	24.7	22.7	22.5	34	22.9			29.4		

Category	Indicator	District value				District ranking	Provincial average	Provincial target	Provincial target	National average	National target	National target
		2011	2012	2013	2014							
TB case finding	Incidence (diagnosed cases) of TB - all types [Cases per 100 000 population]		602.3	591.5	557.3	18	568.8			592.5		
TB treatment outcomes	TB cure rate (new smear positive) [Percentage]	65.9	63.6	68.4		41	69.0			76.8		
	TB death rate (all TB) [Percentage]	8.5	8.5	8.2		28	10.2			7.4	6.0	5.0
	TB defaulter rate (new smear positive) [Percentage]	7.9	8.9	7.5		39	7.1	5.0		5.8	6.0	5.5
	TB treatment success rate (all TB) [Percentage]	66.9	66.7	70.1		45	65.8	82.0		77.9	82.0	83.0
HIV	Percentage of TB cases with known HIV status (ETR.Net) [Percentage]		86.7	92.2	93.7	24	91.7			92.8		
	TB/HIV co-infected client on ART rate (ETR.Net) [Percentage]		68.7	71.2	90.8	7	75.4			78.9		
NCDs	Hypertension prevalence rate (crude) [Percentage]		36.8			37	35.6			31.8		
Burden of disease	Percentage of deaths garbage codes [Percentage]	13.1	13.3	13.4		24	14.0			14.5		
	Percentage of deaths ill-defined [Percentage]	12.1	14.7	18.0		43	14.4			14.0		
	Percentage of YLLs due to communicable, maternal, perinatal, nutrition causes [Percentage]	35.2	32.4	32.5		50	27.2			22.1		
	Percentage of YLLs due to HIV and TB [Percentage]	26.7	27.1	24.9		17	28.1			27.9		
	Percentage of YLLs due to injuries [Percentage]	7.3	8.6	8.4		3	10.3			13.1		
	Percentage of YLLs due to non-communicable diseases [Percentage]	30.8	31.9	34.2		23	34.4			36.9		

Value in red – improvement strategies are urgently needed

Value highlighted in yellow – performance is ranked among the 10 best in the country

Value highlighted in red – performance is ranked among the 10 worst in the country

The district performed very well with regard to five indicators, which ranked among the 10 best in the country in the last reporting period. These indicators were:

- ◆ Average length of stay (district hospitals) (although longer than the provincial target)
- ◆ Antenatal client initiated on ART rate
- ◆ Vitamin A dose 12–59 months coverage
- ◆ TB/HIV co-infected client on ART rate
- ◆ Percentage of years of life lost (YLLs) due to injuries (third lowest in the country).

However, the performance of six indicators ranked among the 10 worst in the country. These indicators were:

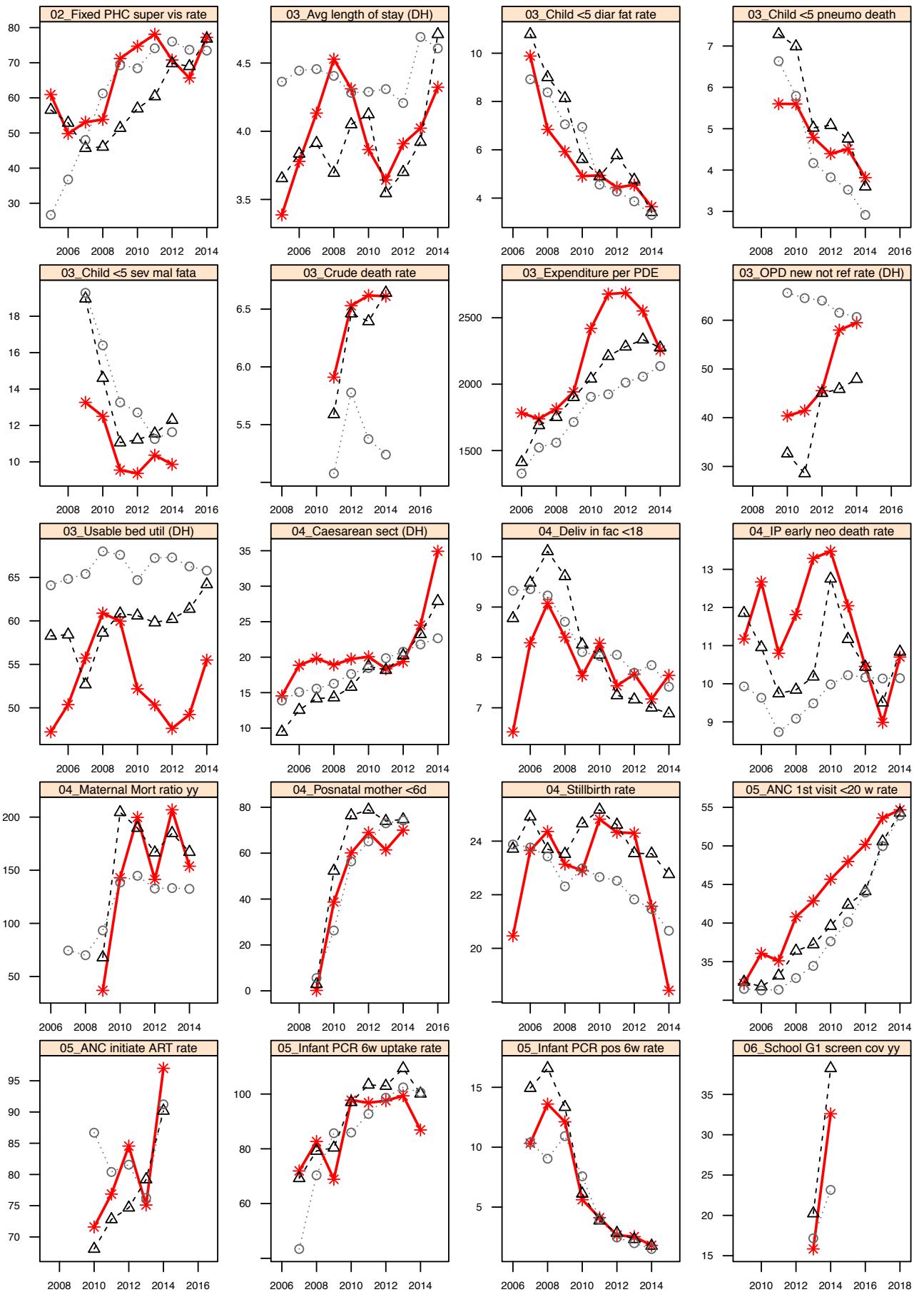
- ◆ Inpatient bed utilisation rate (district hospitals)
- ◆ Inpatient crude death rate
- ◆ Infant 1st PCR test around 6 weeks uptake rate
- ◆ TB treatment success rate (all TB)
- ◆ Percentage of deaths ill-defined
- ◆ Percentage of YLLs due to communicable, maternal, perinatal and nutritional causes (third highest in the country)

Although the district recorded an improvement in the performance of several indicators over the past three years, improvement strategies are needed urgently for the following indicators, especially when compared with the district ranking, 2014/15 provincial and national averages, and the 2014/15 and 2015/16 provincial and national targets. These indicators are:

- ◆ PHC supervisor visit rate (fixed clinic/CHC/CDC)
- ◆ Average length of stay (district hospitals)
- ◆ Inpatient bed utilisation rate (district hospitals)
- ◆ OPD new client not referred rate (district hospitals)
- ◆ Child under 5 years diarrhoea case fatality rate
- ◆ Child under 5 years pneumonia case fatality rate

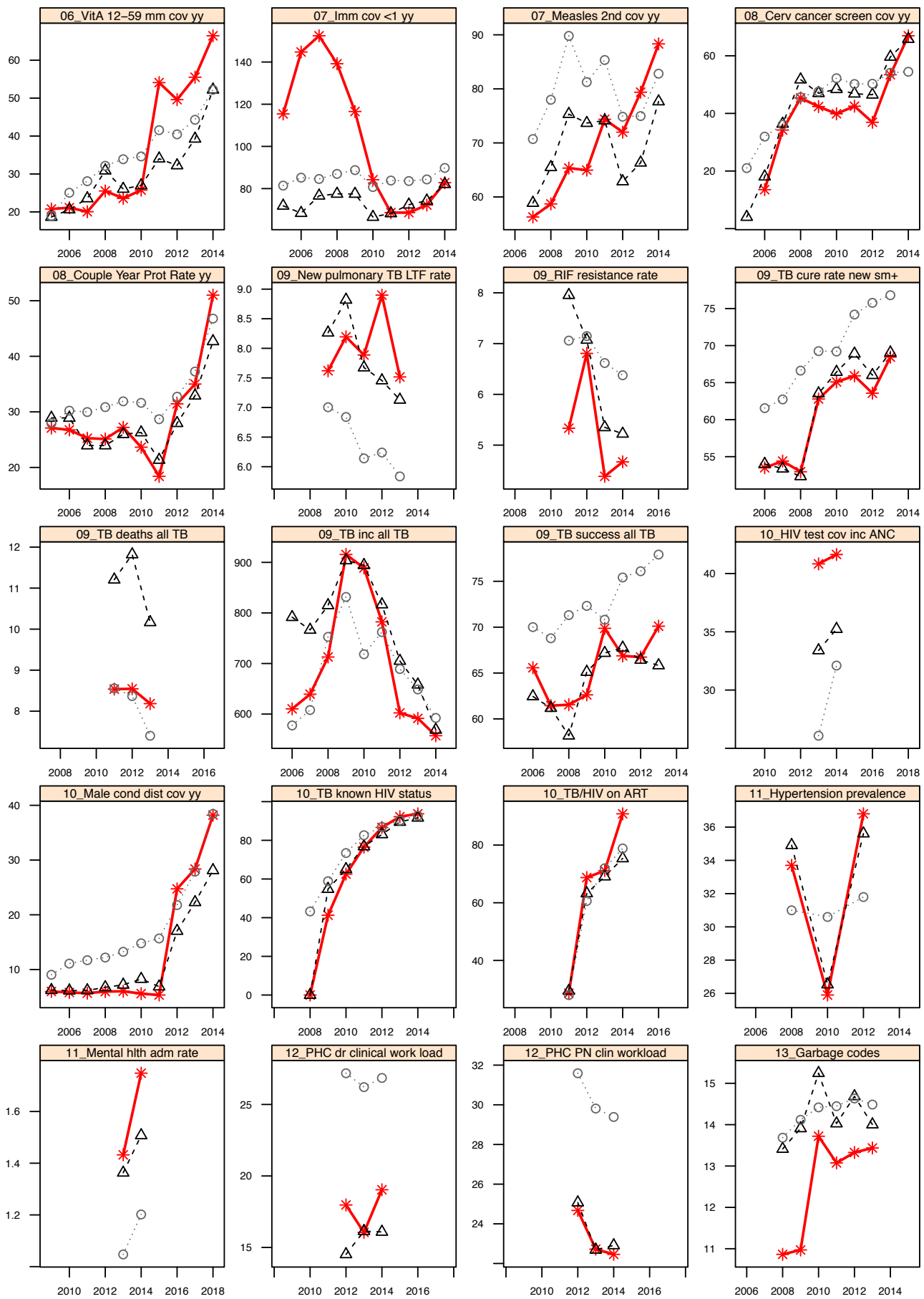
- ◆ Child under 5 years severe acute malnutrition case fatality rate
- ◆ Inpatient crude death rate
- ◆ Delivery by Caesarean section rate (district hospitals)
- ◆ Inpatient early neonatal death rate
- ◆ Maternal mortality in facility ratio
- ◆ Mother postnatal visit within 6 days rate
- ◆ Antenatal 1st visit before 20 weeks rate
- ◆ Infant 1st PCR test around 6 weeks uptake rate
- ◆ Immunisation coverage under 1 year
- ◆ Measles 2nd dose coverage
- ◆ Couple year protection rate
- ◆ Mental health admission rate
- ◆ PHC doctor and professional nurse clinical workloads
- ◆ TB cure rate (new smear positive)
- ◆ TB death rate (all TB)
- ◆ TB defaulter rate (new smear positive)
- ◆ TB treatment success rate (all TB)
- ◆ Hypertension prevalence rate (crude)
- ◆ Percentage of deaths ill-defined
- ◆ Percentage of YLLs due to communicable, maternal, perinatal and nutritional causes

Annual indicators for district: NM Molema (DC38)



District value * Provincial average Δ ZA (national) average ○

Annual indicators for district: NM Molema (DC38)



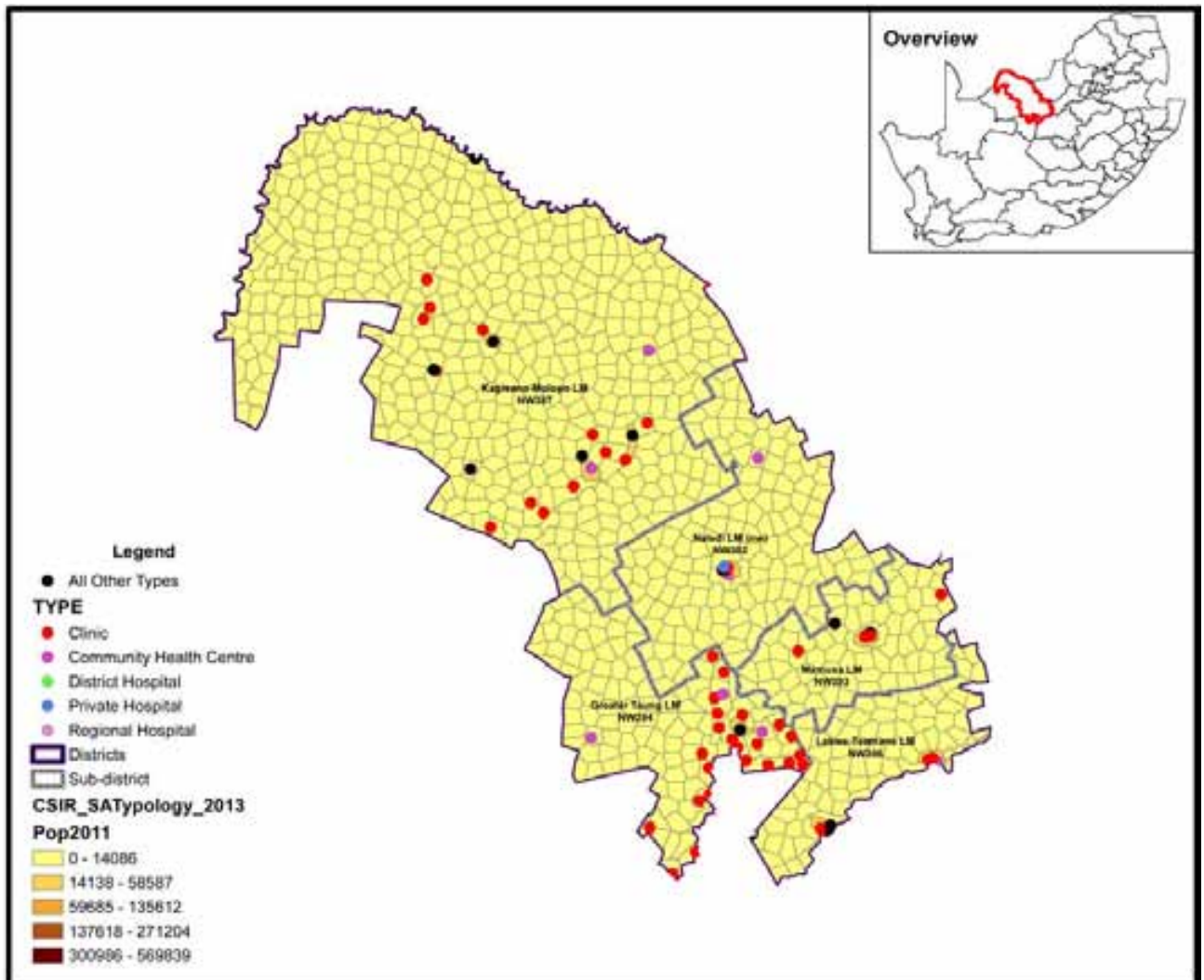
District value * Provincial average Δ ZA (national) average ○

RS Mompoti District Municipality (DC39)

Naomi Massyn

RS Mompoti District is situated in North West Province and comprises five sub-districts, namely Greater Taung, Kagisano-Molopo, Lekwa-Teemane, Mamusa and Naledi. It borders Botswana to the north. The district has a population of 474 430, with a population density of 10.9 persons per km² and falls into socio-economic Quintile 1, the poorest in the province.

Population distribution, sub-district boundaries and health facility locations: RS Mompoti (DC39)



Burden of disease profile

Percentage of deaths by broad cause and leading causes, 2008–2013: RS Mompoti (DC39)

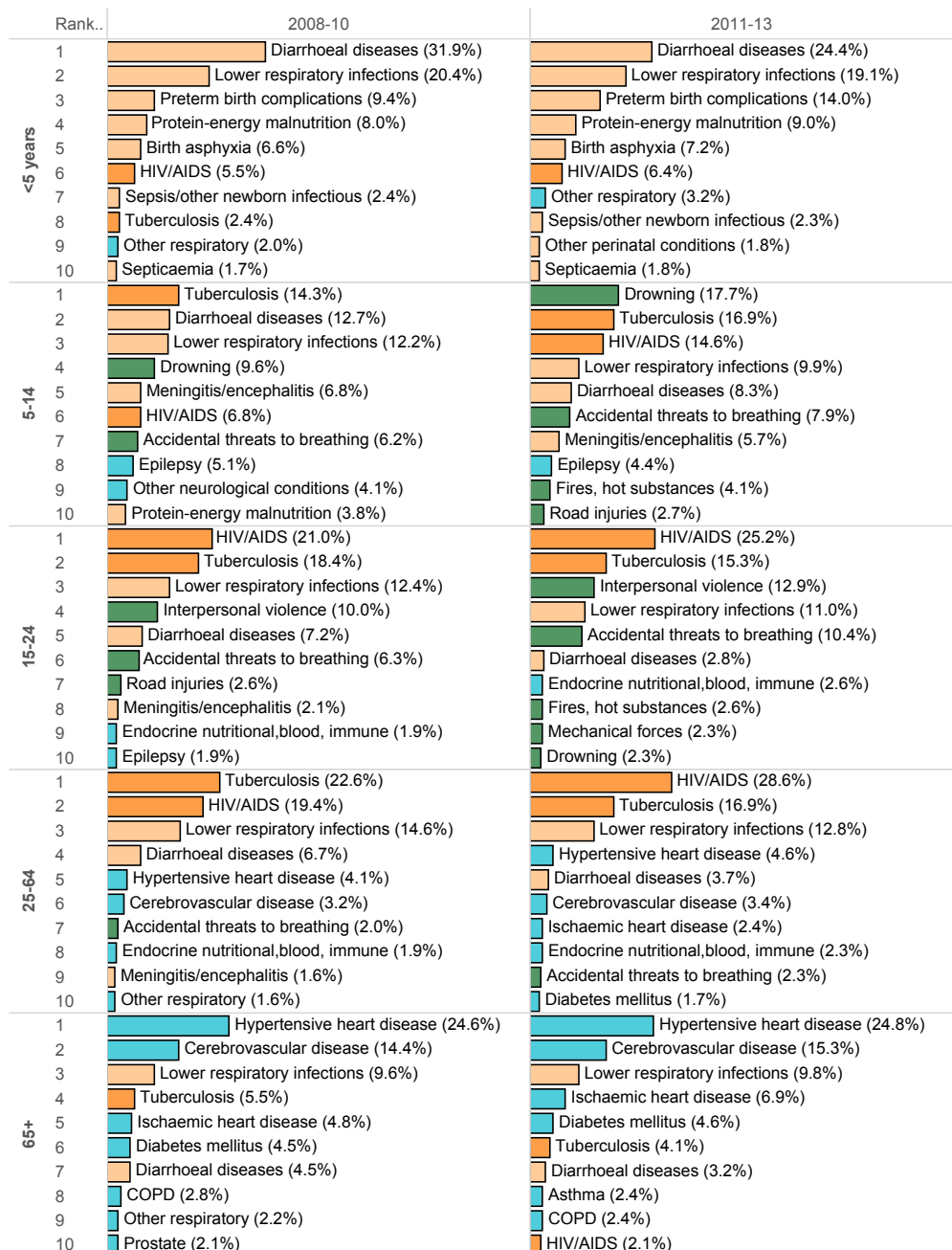
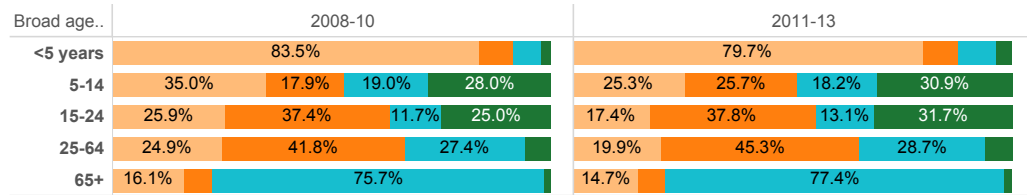
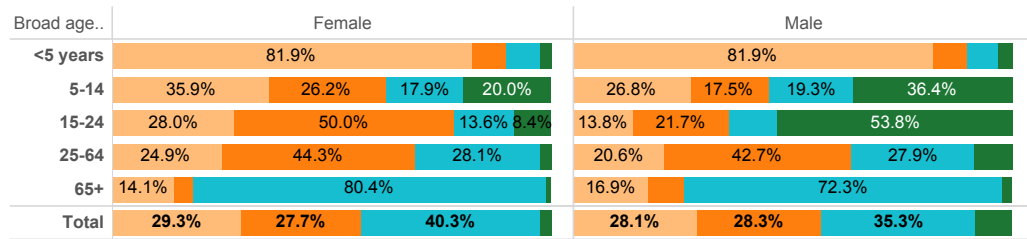
Percentage of deaths by broad cause and leading causes, 2008-2013

NW, RS Mompoti: DC39

Prov, District
NW, RS Mompoti: DC39
 Show History

Broadcause

- Injury
- NCD
- HIV and TB
- Comm_mat_peri_nut



Broad cause groups by age and gender

In the under-5-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for around 82% of deaths.

In the 5–14-year age group, injuries accounted for 20.0% of deaths among females versus 36.4% of deaths among males. There were also gender differences for communicable diseases and maternal, perinatal and nutritional conditions (35.9% of deaths among females versus 26.8% among males), and HIV and TB (26.2% mortality among females versus 17.5% among males).

In the 15–24-year age group, injuries accounted for 53.8% of deaths among males versus only 8.4% among females, while HIV and TB mortality was 50.0% among females versus only 21.7% among males.

In the 25–64-year age group, HIV and TB accounted for largest proportion of deaths among females and males (44.3% and 42.7% respectively). Communicable diseases and maternal, perinatal and nutritional conditions accounted for 24.9% of deaths among females and 20.6% among males, and non-communicable disease mortality was around 28% in both genders.

In the 65-years-and-older age group, non-communicable diseases accounted for the highest proportion of deaths (80.4% among females and 72.3% among males).

Trends in broad cause groups by age

In children under 5 years, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased slightly from 83.5% to 79.7% between 2008–2010 and 2011–2013. In the 5–14-year age group, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 35.0% to 25.3%, while HIV and TB mortality increased from 17.9% to 25.7%. In the 15–24-year age group, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 25.9% to 17.4%, while injury-related deaths increased from 25.0% to 31.7%. In the 25–64-years and 65-years-and-older age groups there was not much change in the broad cause groups over the period.

Trends in leading causes of death by age

Under 5 years

Diarrhoeal diseases (24.4%), lower respiratory infections, preterm birth complications, protein-energy malnutrition, birth asphyxia and HIV and AIDS remained the leading causes of death in this age group between 2008–2010 and 2011–2013. Tuberculosis no longer appeared as one of the top 10 causes of death.

5–14 years

Drowning moved up to become the top leading cause of death in this age group, followed by TB, HIV and AIDS, lower respiratory infections, diarrhoeal diseases, accidental threats to breathing and meningitis/encephalitis.

15–24 years

HIV and AIDS (25.2%), TB, interpersonal violence, lower respiratory infections and accidental threats to breathing remained the top five causes of death in this age group, although the ranking changed.

25–64 years

HIV and AIDS (28.6%), TB and lower respiratory infections remained the top three causes of death in this age group. Hypertensive heart disease moved up one position and diarrhoeal diseases dropped one position. Diabetes mellitus was included in the list in 2011–2013.

65 years and older

Hypertensive heart disease (24.8%), cerebrovascular disease and lower respiratory infections remained the top three leading causes of death in this age group. Other causes included ischaemic heart diseases, diabetes mellitus, TB, diarrhoeal diseases, asthma and chronic obstructive pulmonary disease. HIV and AIDS (2.1%) was included in the list in 2011–2013.

Section B: Profile North West Province

Indicator performance: RS Mompoti (DC39)

Category	Indicator	District value			District ranking 2014/15	Provincial average 2014/15	Provincial target 2014/15	Provincial target 2015/16	National average 2014/15	National target 2014/15	National target 2015/16	
		2012/13	2013/14	2014/15								
Management PHC	PHC supervisor visit rate (fixed clinic/CHC/CDC) [Percentage]	93.2	85.1	82.7	18	76.8	80.0		73.5			
Management Inpatients	Average length of stay (district hospitals) [Days]	4.1	5.0	5.3	21	4.7	3.8		4.6			
	Expenditure per patient day equivalent (district hospitals) [Rand (real 2014/15 prices)]	2 229.3	2 070.3	1 914.1	26	2 274.8			2 136.4			
	Inpatient bed utilisation rate (district hospitals) [Percentage]	55.8	60.3	63.3	34	64.2	65.0		65.8			
	OPD new client not referred rate (district hospitals) [Percentage]	6.6	36.7	42.6	13	47.9			60.7			
	Child under 5 years diarrhoea case fatality rate [Percentage]	2.7	4.8	2.3	17	3.4	5.0		3.3	3.5	3.0	
Mortality Inpatients	Child under 5 years pneumonia case fatality rate [Percentage]	3.8	4.5	2.8	28	3.6	5.0		2.9			
	Child under 5 years severe acute malnutrition case fatality rate [Percentage]	12.7	10.3	13.9	36	12.3	10.0		11.6	8.0	7.0	
	Inpatient crude death rate [Percentage]	6.5	6.2	6.4	40	6.6			5.2			
	Delivery by Caesarean section rate (district hospitals) [Percentage]	22.0	21.7	22.1		27.9			22.7			
Delivery	Delivery in facility under 18 years rate [Percentage]	9.7	10.0	8.7	31	6.9	10.0		7.4			
	Inpatient early neonatal death rate [per 1 000 live births]	8.0	8.1	12.9	42	10.8			10.1		0	
	Maternal mortality in facility ratio [per 100 000 live births]	142.9	110.7	129.1	26	167.1	180.0		132.5	100	80.0	
	Mother postnatal visit within 6 days rate [Percentage]	88.0	80.6	77.1	11	74.7			74.3	80.0	85.0	
	Stillbirth in facility rate [per 1 000 births]	23.3	26.8	25.6	45	22.8			20.7			
	PMTCT	Antenatal 1st visit before 20 weeks rate [Percentage]	47.2	52.7	56.9	28	54.3	60.0		53.9	65.0	70.0
		Antenatal client initiated on ART rate [Percentage]	83.5	74.2	92.2	27	90.2			91.2	93.0	96.0
Infant 1st PCR test around 6 weeks uptake rate [Percentage]		106.7	116.5	103.4	19	100.1			100.6			
Infant 1st PCR test positive around 6 weeks rate [Percentage]		3.4	2.0	2.1	42	1.8	2.0		1.5	1.8	2.0	
Child Health	School Grade 1 screening coverage [Percentage]		22.6	36.5	10	38.2	70.0		23.2	30.0	35.0	
	Vitamin A dose 12-59 months coverage [Percentage]	49.0	49.5	57.3	16	52.2	55.0		52.2	55.0		
Immunisation	Immunisation coverage under 1 year [Percentage]	85.0	87.7	87.5	20	82.1	92.0		89.8	95.0	91.0	
	Measles 2nd dose coverage [Percentage]	77.4	78.1	80.5	23	77.7	95.0		82.8	85.0	85.0	
Reproductive health	Cervical cancer screening coverage [(Percentage)]	73.7	72.9	68.0	11	65.8	70.0		54.5	60.0	64.0	
	Couple year protection rate [Percentage]	29.2	37.2	34.2	49	42.7	37.0		46.8	55.0		
TB case finding	TB Rifampicin resistance confirmed client rate [Percentage]	6.6	4.2	4.8	14	5.2			6.4			
HIV	HIV testing coverage (including ANC)		37.4	37.1	17	35.2			32.1			
	Male condom distribution coverage	16.1	26.2	24.5	39	28.1			38.4			
Non-communicable diseases	Hypertension incidence [per 1 000]	17.7	12.8	12.3		13.9	20.0		13.9			
	Mental health admission rate [Percentage]			0.2		1.5	1.2		1.2			
Human Resources	PHC doctor clinical workload [Clients per doctor per day]	7.8	14.5	17.8	34	16.1			26.9			
	PHC professional nurse clinical workload [Clients per nurse per day]	21.9	22.3	20.4	42	22.9			29.4			

Category	Indicator	District value				District ranking 2013	Provincial average 2013	Provincial target 2013	Provincial target 2014	National average 2013	National target 2013	National target 2014
		2011	2012	2013	2014							
TB case finding	Incidence (diagnosed cases) of TB - all types [Cases per 100 000 population]		800.9	662.9	742.2	32	568.8			592.5		
TB treatment outcomes	TB cure rate (new smear positive) [Percentage]	75.8	78.6	74.9		30	69.0			76.8		
	TB death rate (all TB) [Percentage]	10.6	9.6	8.5		29	10.2			7.4	6.0	5.0
	TB defaulter rate (new smear positive) [Percentage]	5.3	4.5	5.7		30	7.1	5.0		5.8	6.0	5.5
	TB treatment success rate (all TB) [Percentage]	70.5	71.5	71.4		44	65.8	82.0		77.9	82.0	83.0
HIV	Percentage of TB cases with known HIV status (ETR.Net) [Percentage]		87.1	90.6	90.4	42	91.7			92.8		
	TB/HIV co-infected client on ART rate (ETR.Net) [Percentage]		67.2	57.0	73.6	35	75.4			78.9		
NCDs	Hypertension prevalence rate (crude) [Percentage]		42.0			45	35.6			31.8		
Burden of disease	Percentage of deaths garbage codes [Percentage]	11.7	13.7	13.8		26	14.0			14.5		
	Percentage of deaths ill-defined [Percentage]	14.8	14.4	11.8		29	14.4			14.0		
	Percentage of YLLs due to communicable, maternal, perinatal, nutrition causes [Percentage]	33.9	28.1	29.8		46	27.2			22.1		
	Percentage of YLLs due to HIV and TB [Percentage]	32.5	35.3	33.4		40	28.1			27.9		
	Percentage of YLLs due to injuries [Percentage]	6.7	7.3	8.3		1	10.3			13.1		
	Percentage of YLLs due to non-communicable diseases [Percentage]	26.9	29.3	28.5		8	34.4			36.9		

Value in red – improvement strategies are urgently needed

Value highlighted in yellow – performance is ranked among the 10 best in the country

Value highlighted in red – performance is ranked among the 10 worst in the country

The district performed very well with regard to three indicators, which ranked among the 10 best in the country in the last reporting period. These indicators were:

- ◆ School Grade 1 screening coverage
- ◆ Percentage of years of life lost (YLLs) due to injuries
- ◆ Percentage of YLLs due to non-communicable diseases

However, the performance of some indicators ranked among the 10 worst in the country. These indicators were:

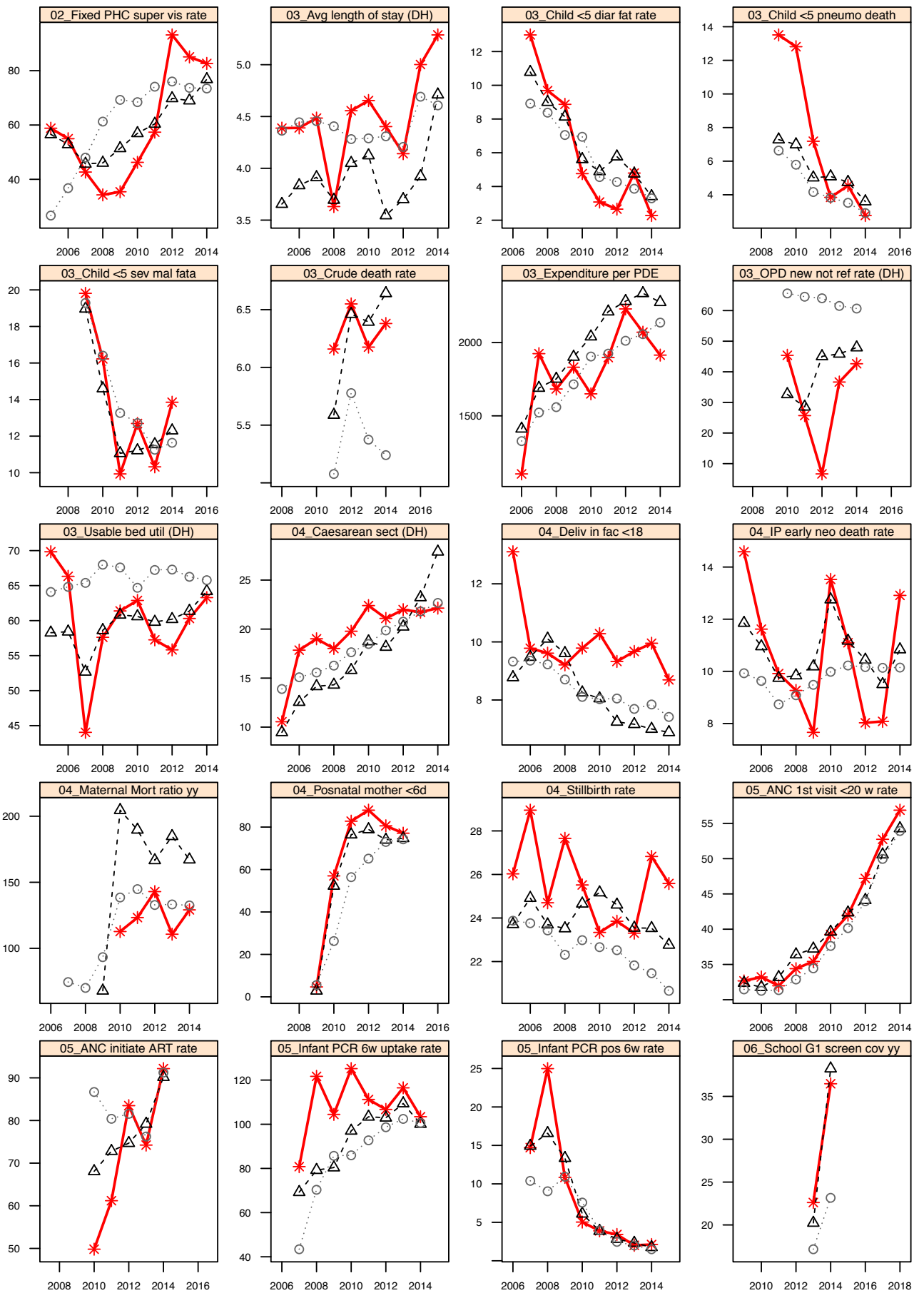
- ◆ Stillbirth in facility rate
- ◆ Couple year protection rate
- ◆ TB treatment success rate (all TB)
- ◆ Hypertension prevalence rate (crude)
- ◆ Percentage of YLLs due to communicable, maternal, perinatal and nutritional causes

Although the district recorded an improvement in the performance of several indicators over the past three years, improvement strategies are needed urgently for the following indicators, especially when compared with the district ranking, 2014/15 provincial and national averages, and the 2014/15 and 2015/16 provincial and national targets. These indicators are:

- ◆ Average length of stay (district hospitals)
- ◆ Inpatient bed utilisation rate (district hospitals)
- ◆ Child under 5 years severe acute malnutrition case fatality rate
- ◆ Inpatient crude death rate
- ◆ Delivery in facility under 18 years rate
- ◆ Inpatient early neonatal death rate
- ◆ Maternal mortality in facility ratio
- ◆ Mother postnatal visit within 6 days rate
- ◆ Stillbirth in facility rate

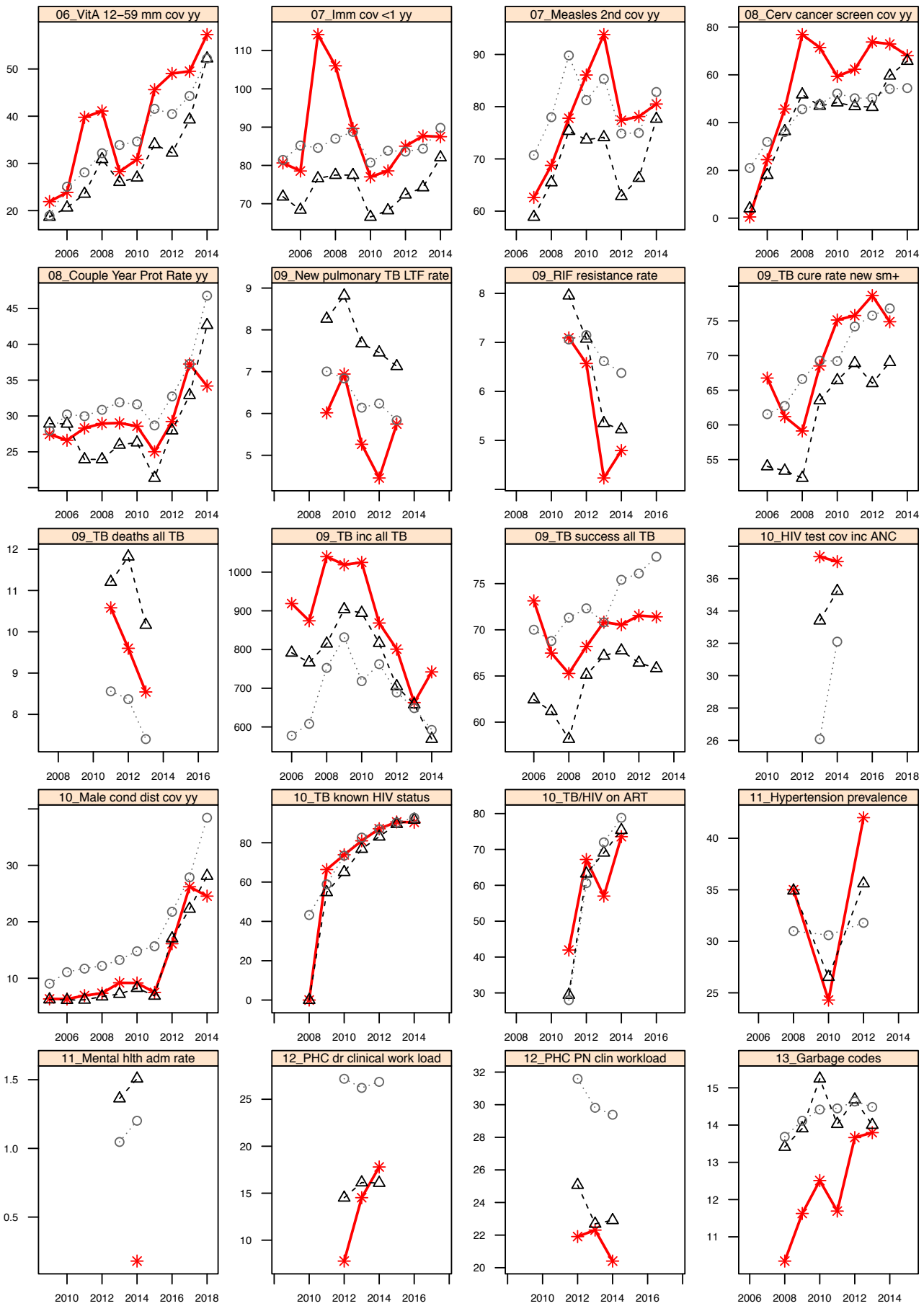
- ◆ Antenatal 1st visit before 20 weeks rate
- ◆ Antenatal client initiated on ART rate
- ◆ Infant 1st PCR test positive around 6 weeks rate
- ◆ Immunisation coverage under 1 year
- ◆ Measles 2nd dose coverage
- ◆ Couple year protection rate
- ◆ Male condom distribution coverage
- ◆ PHC doctor and professional nurse clinical workloads
- ◆ Incidence (diagnosed cases) of TB (all types)
- ◆ TB cure rate (new smear positive)
- ◆ TB death rate (all TB)
- ◆ TB defaulter rate (new smear positive)
- ◆ TB treatment success rate (all TB)
- ◆ TB/HIV co-infected client on ART rate
- ◆ Hypertension prevalence rate (crude)
- ◆ Percentage of YLLs due to communicable, maternal, perinatal and nutritional causes
- ◆ Percentage of YLLs due to HIV and TB

Annual indicators for district: RS Mompoti (DC39)



District value * Provincial average Δ ZA (national) average ○

Annual indicators for district: RS Mompoti (DC39)



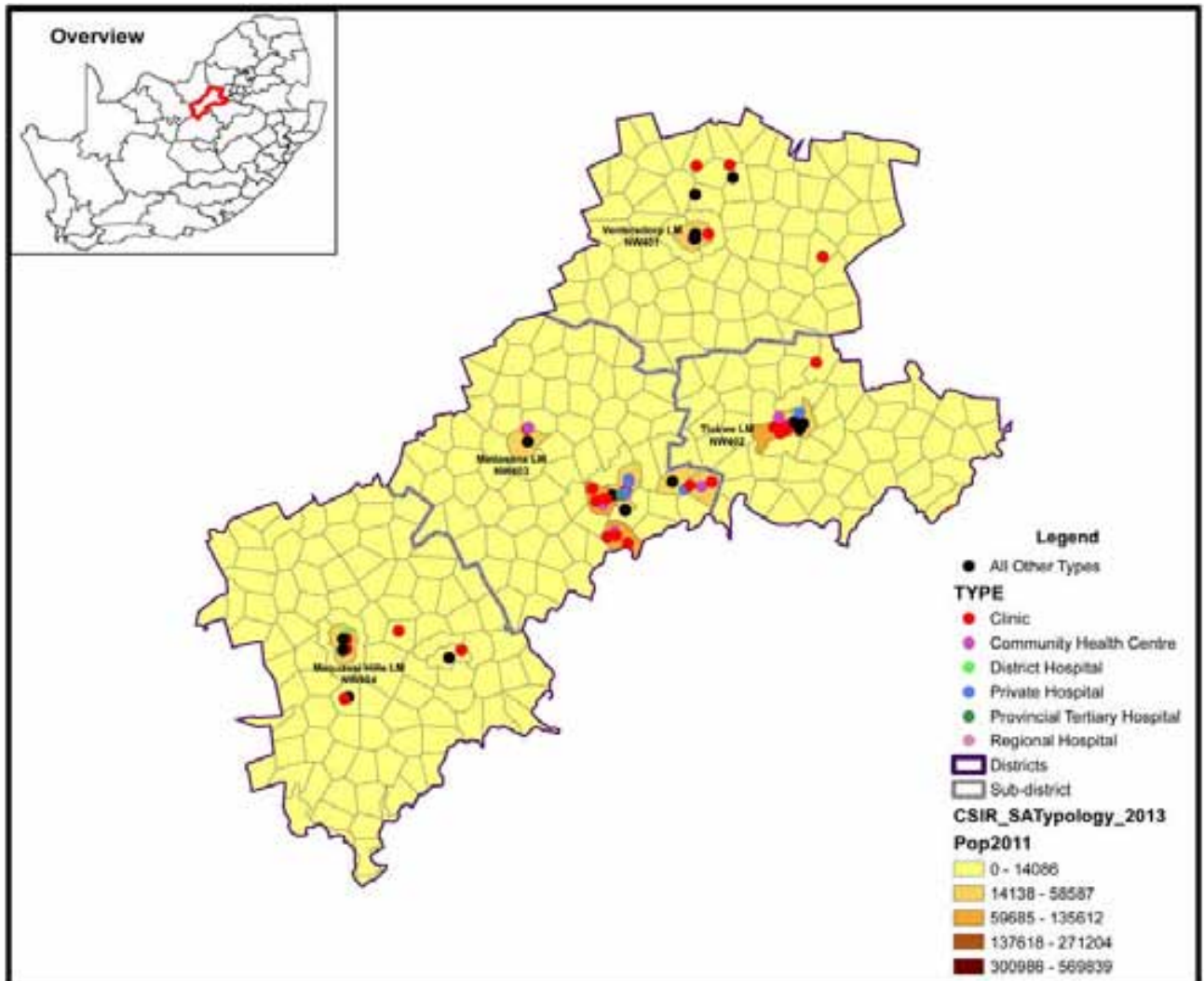
District value * Provincial average Δ ZA (national) average ○

Dr K Kaunda District Municipality (DC40)

Naomi Massyn

Dr K Kaunda District is situated in North West Province and comprises four sub-districts, namely Maquassi Hills, Matlosana, Tlokwe and Ventersdorp. The district has a population of 716 277, with a population density of 48.9 persons per km² and falls into socio-economic Quintile 4. Dr K Kaunda is one of the 11 National Health Insurance (NHI) pilot districts.

Population distribution, sub-district boundaries and health facility locations: Dr K Kaunda (DC40)



Burden of disease profile

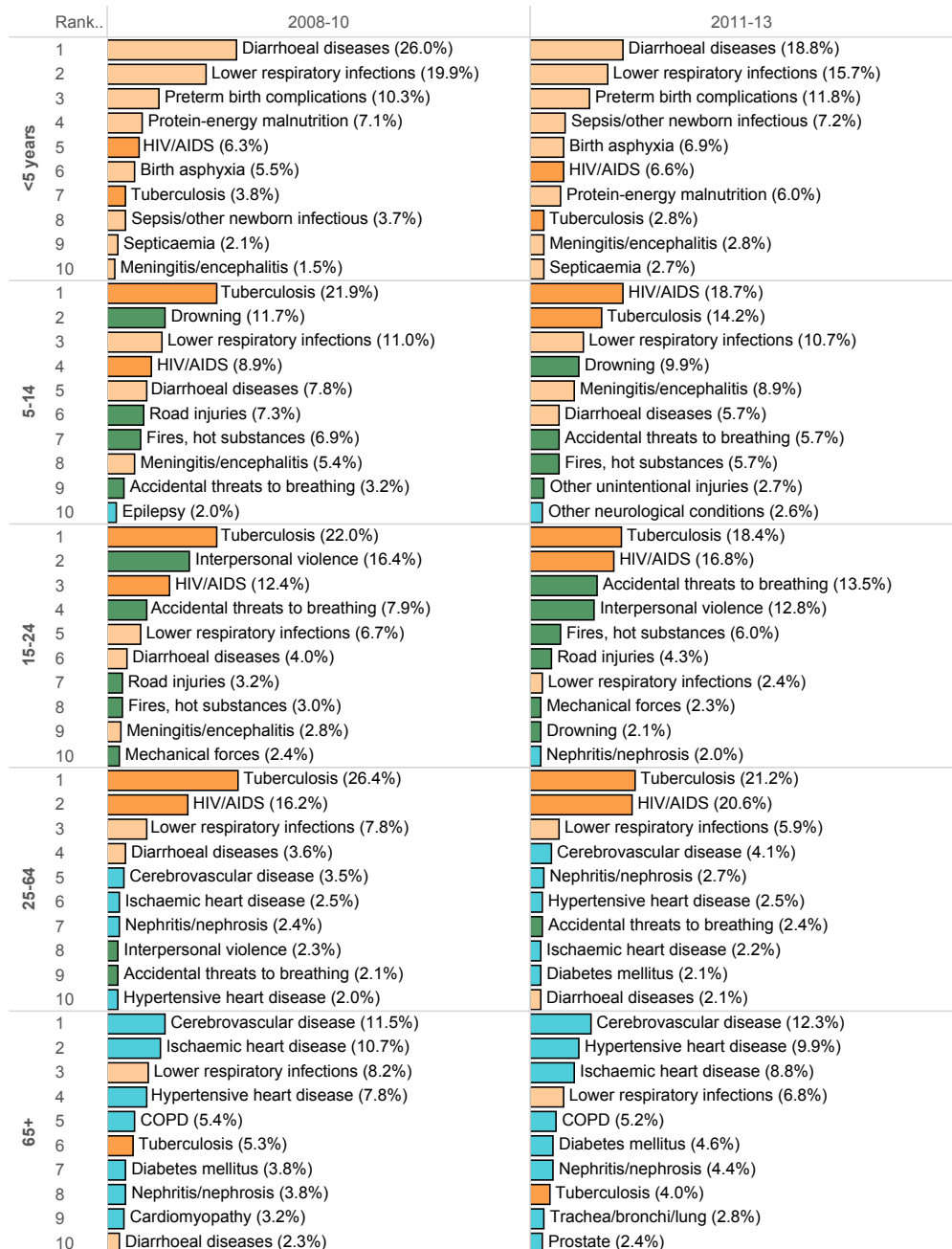
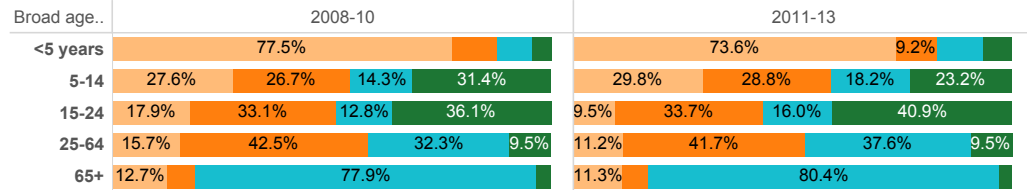
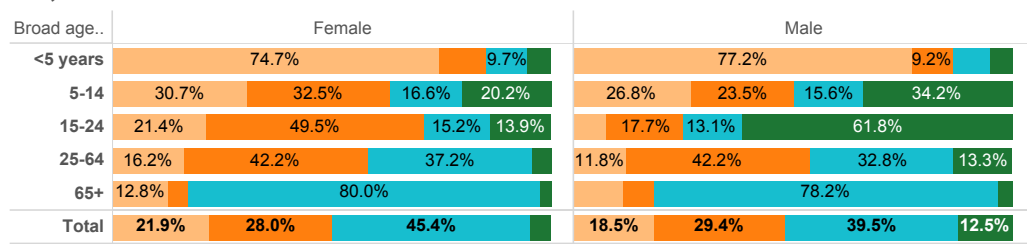
Percentage of deaths by broad cause and leading causes, 2008–2013: Dr K Kaunda (DC40)

Percentage of deaths by broad cause and leading causes, 2008-2013

Prov, District
NW, Dr K Kaunda: DC40
 Show History

Broadcause
■ Injury
■ NCD
■ HIV and TB
■ Comm_mat_peri_nut

NW, Dr K Kaunda: DC40



Broad cause groups by age and gender

In the under-5-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for 74.7% of deaths among females and 77.2% among males. HIV and TB mortality and non-communicable disease mortality were around 9% for females and males.

In the 5–14-year age group, injuries accounted for 20.2% of deaths among females versus 34.2% of deaths among males. There were also gender variations for HIV and TB (32.5% mortality among females versus 23.5% among males).

In the 15–24-year age group, injuries accounted for 61.8% of deaths among males versus only 13.9% among females, while HIV and TB mortality was 49.5% among females versus only 17.7% among males.

In the 25–64-year age group, HIV and TB accounted for 42.2% of deaths among females and males. Communicable diseases and maternal, perinatal and nutritional conditions accounted for 16.2% of deaths among females and 11.8% among males, and non-communicable disease mortality was 37.2% among females and 32.8% among males.

In the 65-years-and-older age group, non-communicable diseases accounted for the highest proportion of deaths (80.0% among females and 78.2% among males).

Trends in broad cause groups by age

In children under 5 years, there was not much change in the broad cause of death over the period between 2008–2010 and 2011–2013. In the 5–14-year age group, injury-related deaths decreased from 31.4% to 23.2%. In the 15–24-year group, injury-related deaths increased from 36.1% to 40.9%, while communicable diseases and maternal, perinatal and nutritional conditions decreased from 17.9% to 9.5%. In the 25–64-years and 65-years-and-older age groups there was not much change in the broad cause groups over the period.

Trends in leading causes of death by age

Under 5 years

Diarrhoeal diseases, lower respiratory infections and preterm birth complications, remained the three leading causes of death between 2008–2010 and 2011–2013 in this age group. Sepsis and other newborn infections moved from eighth to fourth position, followed by birth asphyxia, HIV and AIDS, protein-energy malnutrition and TB.

5–14 years

HIV and AIDS moved up to become the top leading cause of death in this age group, followed by TB, lower respiratory infections, drowning and meningitis/encephalitis.

15–24 years

Tuberculosis remained the first leading cause of death in this age group. HIV and AIDS moved from third to second position, and accidental threats to breathing moved from fourth to third position, followed by interpersonal violence, fires and hot substances, road injuries and lower respiratory infections.

25–64 years

Tuberculosis, HIV and AIDS and lower respiratory infections remained the top three causes of death in this age group. Diarrhoeal diseases dropped from fourth to 10th position. Accidental threats to breathing and diabetes mellitus were included in the list in 2011–2013.

65 years and older

Cerebrovascular disease, hypertensive heart disease, ischaemic heart disease and lower respiratory infections remained the top four leading causes of death in this age group, although the ranking changed. Other causes included chronic obstructive pulmonary disease, diabetes mellitus, nephritis/nephrosis and TB. Tracheal/bronchial/lung diseases and prostate cancer were included in the list in 2011–2013.

Section B: Profile North West Province

Indicator performance: Dr K Kaunda (DC40)

Category	Indicator	District value			District ranking 2014/15	Provincial average 2014/15	Provincial target 2014/15	Provincial target 2015/16	National average 2014/15	National target 2014/15	National target 2015/16	
		2012/13	2013/14	2014/15								
Management PHC	PHC supervisor visit rate (fixed clinic/CHC/CDC) [Percentage]	68.8	75.6	81.9	20	76.8	80.0		73.5			
Management Inpatients	Average length of stay (district hospitals) [Days]	3.2	3.4	3.4	35	4.7	3.8		4.6			
	Expenditure per patient day equivalent (district hospitals) [Rand (real 2014/15 prices)]	2 203.5	2 487.9	2 684.9	48	2 274.8			2 136.4			
	Inpatient bed utilisation rate (district hospitals) [Percentage]	74.7	70.6	67.4	23	64.2	65.0		65.8			
	OPD new client not referred rate (district hospitals) [Percentage]	6.1	10.8	22.0	3	47.9			60.7			
	Child under 5 years diarrhoea case fatality rate [Percentage]	7.0	4.0	1.3	9	3.4	5.0		3.3	3.5	3.0	
Mortality Inpatients	Child under 5 years pneumonia case fatality rate [Percentage]	4.5	3.3	1.5	12	3.6	5.0		2.9			
	Child under 5 years severe acute malnutrition case fatality rate [Percentage]	8.7	12.2	10.7	24	12.3	10.0		11.6	8.0	7.0	
	Inpatient crude death rate [Percentage]	6.0	6.3	6.0	35	6.6			5.2			
	Delivery by Caesarean section rate (district hospitals) [Percentage]	12.4	21.4	19.8		27.9			22.7			
Delivery	Delivery in facility under 18 years rate [Percentage]	6.2	6.1	6.1	10	6.9	10.0		7.4			
	Inpatient early neonatal death rate [per 1 000 live births]	14.0	16.2	11.8	38	10.8			10.1		0	
	Maternal mortality in facility ratio [per 100 000 live births]	222.3	257.4	232.2	49	167.1	180.0		132.5	100	80.0	
	Mother postnatal visit within 6 days rate [Percentage]	61.2	64.4	56.1	40	74.7			74.3	80.0	85.0	
	Stillbirth in facility rate [per 1 000 births]	21.9	26.9	23.7	37	22.8			20.7			
	PMTCT	Antenatal 1st visit before 20 weeks rate [Percentage]	39.3	49.3	55.8	31	54.3	60.0		53.9	65.0	70.0
		Antenatal client initiated on ART rate [Percentage]	89.3	85.7	93.2	23	90.2			91.2	93.0	96.0
Infant 1st PCR test around 6 weeks uptake rate [Percentage]		92.7	90.5	90.2	39	100.1			100.6			
Infant 1st PCR test positive around 6 weeks rate [Percentage]		3.5	2.0	2.1	44	1.8	2.0		1.5	1.8	2.0	
Child Health	School Grade 1 screening coverage [Percentage]		37.5	46.7	6	38.2	70.0		23.2	30.0	35.0	
	Vitamin A dose 12-59 months coverage [Percentage]	33.1	41.0	54.5	20	52.2	55.0		52.2	55.0		
Immunisation	Immunisation coverage under 1 year [Percentage]	76.3	79.8	86.8	21	82.1	92.0		89.8	95.0	91.0	
	Measles 2nd dose coverage [Percentage]	63.9	66.3	79.0	28	77.7	95.0		82.8	85.0	85.0	
Reproductive health	Cervical cancer screening coverage ([Percentage]	62.3	66.2	66.6	13	65.8	70.0		54.5	60.0	64.0	
	Couple year protection rate [Percentage]	26.8	29.1	51.8	15	42.7	37.0		46.8	55.0		
TB case finding	TB Rifampicin resistance confirmed client rate [Percentage]	7.6	6.0	5.6	22	5.2			6.4			
HIV	HIV testing coverage (including ANC)		32.9	32.8	28	35.2			32.1			
	Male condom distribution coverage	15.5	17.6	37.8	25	28.1			38.4			
Non-communicable diseases	Hypertension incidence [per 1 000]	13.6	13.2	13.9		13.9	20.0		13.9			
	Mental health admission rate [Percentage]		2.2	2.1		1.5	1.2		1.2			
Human Resources	PHC doctor clinical workload [Clients per doctor per day]	12.0	13.1	13.2	48	16.1			26.9			
	PHC professional nurse clinical workload [Clients per nurse per day]	31.1	23.6	24.5	27	22.9			29.4			

Category	Indicator	District value				District ranking 2013	Provincial average 2013	Provincial target 2013	Provincial target 2014	National average 2013	National target 2013	National target 2014
		2011	2012	2013	2014							
TB case finding	Incidence (diagnosed cases) of TB - all types [Cases per 100 000 population]		1 097.9	944.8	696.2	29	568.8			592.5		
TB treatment outcomes	TB cure rate (new smear positive) [Percentage]	69.9	59.4	61.6		49	69.0			76.8		
	TB death rate (all TB) [Percentage]	13.6	15.9	14.1		51	10.2			7.4	6.0	5.0
	TB defaulter rate (new smear positive) [Percentage]	7.6	8.7	8.3		43	7.1	5.0		5.8	6.0	5.5
	TB treatment success rate (all TB) [Percentage]	68.2	62.2	60.1		49	65.8	82.0		77.9	82.0	83.0
HIV	Percentage of TB cases with known HIV status (ETR.Net) [Percentage]		75.2	85.2	87.4	48	91.7			92.8		
	TB/HIV co-infected client on ART rate (ETR.Net) [Percentage]		69.7	71.3	78.4	32	75.4			78.9		
NCDs	Hypertension prevalence rate (crude) [Percentage]		39.1			40	35.6			31.8		
Burden of disease	Percentage of deaths garbage codes [Percentage]	14.9	15.6	14.8		41	14.0			14.5		
	Percentage of deaths ill-defined [Percentage]	10.2	9.2	11.1		27	14.4			14.0		
	Percentage of YLLs due to communicable, maternal, perinatal, nutrition causes [Percentage]	22.6	18.4	20.4		25	27.2			22.1		
	Percentage of YLLs due to HIV and TB [Percentage]	33.7	34.1	32.0		35	28.1			27.9		
	Percentage of YLLs due to injuries [Percentage]	10.1	11.0	11.4		14	10.3			13.1		
	Percentage of YLLs due to non-communicable diseases [Percentage]	33.7	36.5	36.2		28	34.4			36.9		

Value in red – improvement strategies are urgently needed

Value highlighted in yellow – performance is ranked among the 10 best in the country

Value highlighted in red – performance is ranked among the 10 worst in the country

The district performed very well with regard to four indicators, which ranked among the 10 best in the country in the last reporting period. These indicators were:

- ◆ OPD new client not referred rate for district hospitals (third lowest in the country)
- ◆ Child under 5 years diarrhoea case fatality rate
- ◆ Delivery in facility under 18 years rate
- ◆ School Grade 1 screening coverage (although below the provincial target)

However, the performance of nine indicators ranked among the 10 worst in the country. These indicators were:

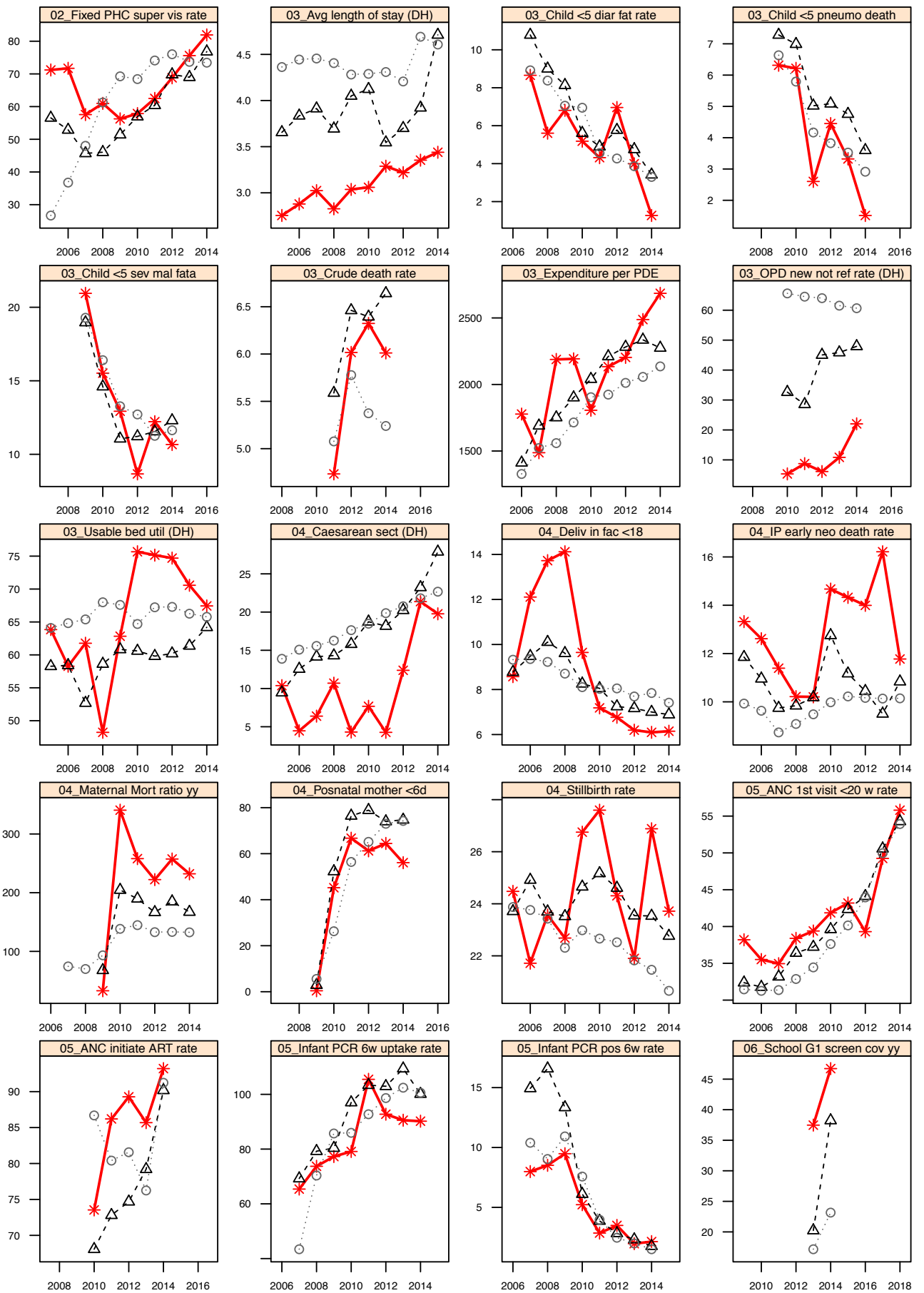
- ◆ Expenditure per patient day equivalent (district hospitals)
- ◆ Maternal mortality in facility ratio
- ◆ Infant 1st PCR test positive around 6 weeks rate
- ◆ PHC doctor clinical workload
- ◆ TB cure rate (new smear positive)
- ◆ TB death rate (all TB) (second highest in the country)
- ◆ TB defaulter rate (new smear positive)
- ◆ TB treatment success rate (all TB)
- ◆ Percentage of TB cases with known HIV status

Although the district recorded an improvement in the performance of several indicators over the past three years, improvement strategies are needed urgently for the following indicators, especially when compared with the district ranking, 2014/15 provincial and national averages, and the 2014/15 and 2015/16 provincial and national targets. These indicators are:

- ◆ Expenditure per patient day equivalent (district hospitals)
- ◆ Child under 5 years severe acute malnutrition case fatality rate
- ◆ Inpatient crude death rate
- ◆ Inpatient early neonatal death rate

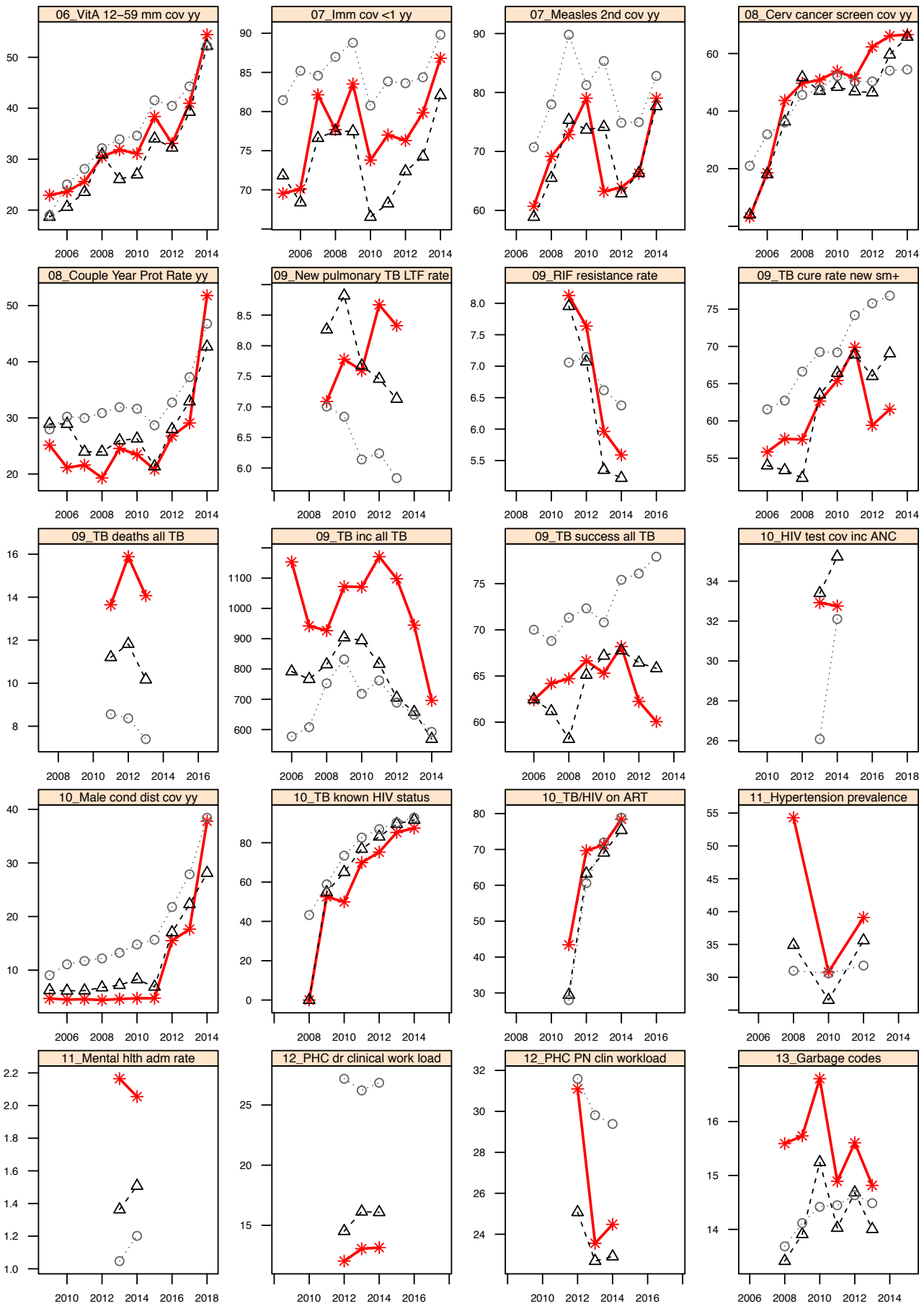
- ◆ Maternal mortality in facility ratio
- ◆ Mother postnatal visit within 6 days rate
- ◆ Stillbirth in facility rate
- ◆ Antenatal 1st visit before 20 weeks rate
- ◆ Infant 1st PCR test around 6 weeks uptake rate
- ◆ Infant 1st PCR test positive around 6 weeks rate
- ◆ School Grade 1 screening coverage
- ◆ Immunisation coverage under 1 year
- ◆ Measles 2nd dose coverage
- ◆ Couple year protection rate
- ◆ TB Rifampicin resistance confirmed client rate
- ◆ HIV testing coverage (including ANC)
- ◆ Mental health admission rate
- ◆ PHC doctor clinical workload
- ◆ Incidence (diagnosed cases) of TB (all types)
- ◆ TB cure rate (new smear positive)
- ◆ TB death rate (all TB)
- ◆ TB defaulter rate (new smear positive)
- ◆ TB treatment success rate (all TB)
- ◆ Percentage of TB cases with known HIV status
- ◆ Hypertension prevalence rate (crude)
- ◆ Percentage of deaths garbage codes
- ◆ Percentage of years of life lost due to HIV and TB

Annual indicators for district: Dr K Kaunda (DC40)



District value * Provincial average Δ ZA (national) average ○

Annual indicators for district: Dr K Kaunda (DC40)



District value * Provincial average Δ ZA (national) average ○