MEASURABLE PERFORMANCE AND ACCOUNTABLE DELIVERY

OUTPUTS AND MEASURES

OUTCOME 2: A LONG AND HEALTHY LIFE FOR ALL SOUTH AFRICANS

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OUTPUT AND MEASURES

Output 1: Increasing life expectancy

<table>
<thead>
<tr>
<th>Baseline for 2009</th>
<th>Target 2014/15</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Life expectancy</strong></td>
<td></td>
</tr>
<tr>
<td>53,5 years (Males)</td>
<td>58-60 years for all South Africans</td>
</tr>
<tr>
<td>57,2 years (Females)</td>
<td></td>
</tr>
</tbody>
</table>

Key strategic interventions and targets include:

- Increase the number of new patients initiated on Antiretroviral Therapy (ART)
- Initiate people with HIV and AIDS and Tuberculosis (TB) co-morbidity at a CD 4 count of 350 or less on ART
- Strengthen the integrated TB Control Programme
- Increase the national average TB cure rate from 64% to 85%
- Implement co-ordinated intersectoral interventions to reduce intentional and unintentional injuries
- Halt malaria transmission nationwide and prevent re-introduction of malaria in non-endemic areas
- Decrease the incidence of malaria
- Enhance the implementation of the National Epidemic Preparedness and Response Plan in line with International Health Regulations

Output 2: Decreased maternal and child mortality

<table>
<thead>
<tr>
<th>Baseline for 2009</th>
<th>Target 2014/15</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Maternal Mortality:</strong></td>
<td></td>
</tr>
<tr>
<td>ratio 400-625 deaths per 100 000 live births</td>
<td>100 or less per 100 000 live births</td>
</tr>
<tr>
<td><strong>Child Mortality</strong></td>
<td></td>
</tr>
<tr>
<td>rate of 69 deaths per 1 000 live births</td>
<td>30-45 per 1 000 live births</td>
</tr>
</tbody>
</table>

Key strategic interventions and targets include:

- Increase the percentage of infants requiring dual therapy for PMTCT who actually receive from 10% to 60%
- Increase the percentage of mothers and babies who receive post-natal care within 6 days of delivery from under 5% to 70%
• Increase the percentage of maternity care facilities which review maternal and perinatal deaths and address identified deficiencies from 45% to 80%
• Increase the proportion of facilities providing Basic Antenatal Care (BANC)
• Increase the percentage of health facilities that have health workers trained in Emergency Obstetric Care and Comprehensive Emergency Obstetric Care
• Increase the proportion of designated health facilities providing Choice on Termination of Pregnancy (CTOP)
• Increase the percentage of children under 1 year of age that are vaccinated with pneumococcal and rotavirus vaccines to 90%
• Increase the immunisation coverage from 88% to 95%
• Increase the percentage of Nurse Training institutions that teach IMCI in pre-service curriculum from 70% to 100%
• Increase the proportion of schools which are visited by a School Health Nurse at least once a year from less than 5% to 20%
• Conduct health screening of learners in Grade 1 in Q1 schools for eyes, ears and teeth
• Increase the percentage of pregnant women who book for antenatal care before 20 weeks gestation from 20% to 50%
• Enhance the clinical skills of health workers
• Improve the use of clinical guidelines and protocols

Output 3: Combating HIV and AIDS and decreasing the burden of disease from Tuberculosis

Key strategic interventions and targets include:

• Strengthen health care provider-initiated counselling and testing in health facilities, with a special focus on STI, TB, antenatal, IMCI, family planning and general curative services
• Increase the proportion of pregnant women tested through health care provider- initiated Counselling and testing for all pregnant women
• Provide life skills education to youth and increase the implementation of youth friendly services
• Scaling up condom distribution for both male and female condoms
• Decrease the number of reported TB cases from 431 165 to 175 000
• Reduce the TB defaulter rate annually
• Develop research programme for new TB drugs
• Improve access to health institutions, especially primary care institutions
• Place all eligible HIV positive individuals on TB prophylaxis
• Train health professionals in TB management
• Initiate TB-HIV infected patients at a CD 4 count of 350 or less
• Accelerate contact tracing
• Enhance compliance with treatment guidelines
• Eliminate TB drug stock-outs
• Provide Isonaid Preventive Therapy (IPT) to HIV positive patients with no active TB
• Provide Cotrimoxazole Preventive therapy (CPT) to HIV-TB co-infected patients
• Integrate TB and HIV services (including provision of ART)
• Ensure proper functioning of an expanded TB DOTS programme
• Initiate all MDR patients who are HIV positive on ART irrespective of CD4 count
• Develop and implement a model for decentralised management of MDR, including at community/household levels.

**Output 4: Strengthening Health System Effectiveness**

Key strategic interventions and targets include:

• Revitalisation of primary health care
• Improved physical infrastructure for healthcare delivery
• Improved patient care and satisfaction
• Accreditation of health facilities for quality
• Enhanced operational management of health facilities
• Improved access to human resources for health
• Improved health care financing
• Strengthened health information systems (HIS)
• Improved health services for the youth
• Expanded access to home based care and community health workers