cm51590

2018/2019 Individual Performance Scorecard
Executive Director: Richard Bosman
1 July 2018 - 30 June 2019

PERFORMANCE DASHBOARD

No.	Objective	Key Performance Indicator	Baseline as at 30 June 2018	Proposed Annual Target 2018/19	Quarter 1 30 Sep 2018 Target	Quarter 2 31 Dec 2018 Target	Quarter 3 31 Mar 2019 Target	Quarter 4 30 Jun 2019 Target	WEIGHTING
MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION									26%
MUNICIPAL FINANCIAL VIABILITY									20%
SERVICE DELIVERY/GOOD GOVERNANCE									44%
SPECIAL PROJECTS									10%
									100%
MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION									26%
TRANSVERSAL MANAGEMENT									12%
1	Organisational culture	Increase in Culture assessment survey value for identified attributes (Score 1 - 5) per directorate	3.2	0.5	N/A	N/A	N/A	0.5	4%
2	Transversal Management	Percentage of approved policies, by-laws and corporate SOPs assessed and communicated	New	100%	100%	100%	100%	100%	3%
3		Percentage of assigned Resilience pathfinding questions actioned	New	100%	N/A	N/A	100%	N/A	1%
4		Increase in the PPM maturity level based on the PPM Operating Model	1.75	1	0.25	0.5	0.75	1	2%
5		Percentage of repeatable contracts with timelines indicating the process to start contract	New	95%	95%	95%	95%	95%	2%
MANAGEMENT INDICATORS									14%
6	4.3 Building Integrated Communities	Percentage adherence to equal or more than 2% of complement for persons with disabilities (PWD)	Actual unaudited as at 30 June 2018	2%	2%	2%	2%	2%	1%
7		Percentage adherence to EE target in all appointments (internal & external) per directorate	Actual unaudited as at 30 June 2018	85%	85%	85%	85%	85%	2%
8	5.1 Operational Sustainability	Percentage of absenteeism	Actual unaudited as at 30 June 2018	≤5%	≤5%	≤5%	≤5%	≤5%	2%
9		Percentage vacancy rate	Actual unaudited as at 30 June 2018	≤7%	≤7%	≤7%	≤7%	≤7%	1%
10		Percentage of Probity functions recommendations implemented	Actual unaudited as at 30 June 2018	85%	85%	85%	85%	85%	5%
11		Percentage budget spent on implementation of Workplace Skills Plan per directorate	Actual unaudited as at 30 June 2018	95%	10%	30%	70%	95%	3%

No.	Objective	Key Performance Indicator	Baseline as at 30 June 2018	Proposed Annual Target 2018/19	Quarter 1 30 Sep 2018 Target	Quarter 2 31 Dec 2018 Target	Quarter 3 31 Mar 2019 Target	Quarter 4 30 Jun 2019 Target	WEIGHTING
		MUNICIPAL FINANCIAL VIABILITY							**20%**
12	5.1 Operational Sustainability	Percentage of projects screened in SAP PPM	Actual unaudited as at 30 June 2018	95%	95%	95%	95%	95%	4%
13		Percentage spend of capital budget	Actual unaudited as at 30 June 2018	90%	Dir/Dept. projected cash flow/ total budget	Dir/Dept. projected cash flow/ total budget	Dir/Dept. projected cash flow/ total budget	90%	6%
14		Percentage of operating budget spent	Actual unaudited as at 30 June 2018	95%	Dir/Dept. projected cash flow/ total budget	Dir/Dept. projected cash flow/ total budget	Dir/Dept. projected cash flow/ total budget	95%	5%
15		Percentage of assets verified	Actual unaudited as at 30 June 2018	100%	N/A	N/A	60%	100%	5%
		SERVICE DELIVERY/GOOD GOVERNANCE							**44%**
16	2.1 Safe Communities	2.A Number of new areas with CCTV Surveillance cameras	New	3	0	0	0	3	10%
17		Number of drivers screened for driving under the influence	Actual unaudited as at 30 June 2018	66000	16500	33000	49500	66000	10%
18		Number of Inspections at Scrap Metal Dealers	Actual unaudited as at 30 June 2018	1785	446	800	1338	1785	5%
19		Number of liquor premises inspected for compliance in terms of City By-laws and Provincial Legislation	Actual unaudited as at 30 June 2018	2788	697	1250	2091	2788	10%
20	5.1 Operational Sustainability	Percentage of Capex and Opex items (finance) matched to demand plan items	New	75%	75%	75%	75%	75%	1%
21		Average turnaround time (16 weeks) of regular tender processes in accordance with demand plan	New	16 weeks	16 weeks	16 weeks	16 weeks	16 weeks	1%
22		Average turnaround time (20 weeks) of complex tender processes in accordance with demand plan	New	20 weeks	20 weeks	20 weeks	20 weeks	20 weeks	1%
23		Percentage reduction in the number of SCM deviations	New	20%	N/A	N/A	N/A	20%	2%
24		Percentage spend on repairs and maintenance	Actual unaudited as at 30 June 2018	95%	Dir/Dept. projected cash flow/ total budget	Dir/Dept. projected cash flow/ total budget	Dir/Dept. projected cash flow/ total budget	95%	4%
		SPECIAL PROJECTS							**10%**
25	2.1 Safe Communities	Percentage Budget Spent on integrated information management system (EPIC 2)	New	100%	Annual Target	Annual Target	Annual Target	100%	5%
26		Initiation of Phase 2 of the on-lime events permitting system.	New	100%	25%	50%	75%	100%	5%

No.	Objective	Key Performance Indicator	Baseline as at 30 June 2018	Proposed Annual Target	Quarter 1 30 Sep 2018	Quarter 2 31 Dec 2018	Quarter 3 31 Mar 2019	Quarter 4 30 Jun 2019	WEIGHTING
				2018/19	Target	Target	Target	Target	

19/7/2018

Executive Director

Richard Bosman

City Manager

Lungelo Mbandazayo

2018 -07- 25

2018/2019 Individual Performance Scorecard
Executive Director: Richard Bosman
1 July 2018 - 30 June 2019

DEFINITIONS

No.	Objective	Key Performance Indicator		WEIGHTING	CONTACT DEPARTMENT
MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION				**26%**	
MUNICIPAL FINANCIAL VIABILITY				**20%**	
SERVICE DELIVERY/GOOD GOVERNANCE				**44%**	
SPECIAL PROJECTS				**10%**	
MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION				**26%**	
TRANSVERSAL MANAGEMENT				**12%**	
1	Organisational culture	Increase in Culture assessment survey value for identified attributes (Score 1 - 5) per directorate	A statistically valid and reliable composite score which measures employee perceptions of shared values, employee engagement and leading change through the annual cultural assessment survey as measured per directorate. A positive outcome of the cultural assessment survey would be a score of > 2.5. The measure is given against the Likert scale ranging from: 1 strongly disagree and 5 strongly agree The objective is an annual increase of 0.5 on the respective baselines for Directorates, e.g.- Target: Baseline + Increase ---> 3.2+0.5 = 3.7.	4%	**Department:** Organisational Effectiveness and Innovation **Source document:** Survey results **Contact person:** Monica Pregnolato 021 400 9221
2	Transversal Management	Percentage of approved policies, by-laws and corporate SOPs assessed and communicated	Number of SOPs assessed and communicated to management as a percentage of all approved policies, by-laws and corporate SOPs for implementation for the financial year.	3%	**Department:** Strategic Policy Unit **Source document:** List of policies, by-laws and SOPs **Contact person:** Daniel Sullivan 021 400 5097 Hugh Cole (Director: OPP) sends a list of approved policies and by-laws to the CM quarterly
3		Percentage of assigned Resilience pathfinding questions actioned	This indicator measures: the number of assigned pathfinding questions actioned per ED according to the action plans and terms of reference set out by the Resilience Department and signed off by EMT, divided by the total number of assigned pathfinding questions assigned to the ED. The questions will feed into the Resilience Strategy which will be approved by Council on 31 March 2019. Note: Where a pathfinding question is assigned to more than one directorate, then both EDs shall be scored for the delivery thereof.	1%	**Department:** Resilience **Source document:** Quarterly results and report to EMT **Contact person:** Cayley Green 021 400 1257

No.	Objective	Key Performance Indicator		WEIGHTING	CONTACT DEPARTMENT
4	Transversal Management	Increase in the PPM maturity level based on the PPM Operating Model	This is based on the roll-out of the PPM Operating Model. The maturity level is measured on a scale of 1 - 5. The Maturity Levels: * Level 1 – Initial Process: No standard process or tracking system – informal processes * Level 2 – Repeatable Process: Minimum standards for processes and procedures * Level 3 – Defined Processes: Defined processes which allow for flexibility * Level 4 – Managed Process: Obtain and retain specific measurements and quality management requirements * Level 5 – Optimised Processes: Continuous process improvement and proactive technology and problem management for future improvements The EDs for Finance and Strategic Governance will be measured on a City-wide maturity level. This indicator is cumulative.	2%	**Department:** Organisational Performance Management: CPPM **Source document:** PPM assessment **Contact person:** Ben Peters 021 400 9206
5		Percentage of repeatable contracts with timelines indicating the process to start contract	Monthly Tender Tracking System (TTS) report indicating the percentage of repeatable contracts with agreed timelines as agreed with SCM and marked as such in TTS, measured at the end of the quarter (not cumulative). Five percent (5%) error rate to account for the contracts created in the last week of the quarter. Monthly TTS report will be made available by the Contract Management Unit from the Contract Monitoring System to EMT. Repeatable contracts refers to contracts where the goods and services are recurring as opposed to once off.	2%	**Department:** Organisational Performance Management: Contract Management **Source document:** Monthly TTS report to EMT **Contact person:** Maureen Whare 021 400 9206
		MANAGEMENT INDICATORS		**14%**	
6	4.3 Building Integrated Communities	Percentage adherence to equal or more than 2% of complement for persons with disabilities (PWD)	This indicator measures : The disability plan target: This measures the percentage of disabled staff employed at a point in time against the target of 2%. This category forms part of the `Percentage adherence to EE target', but is indicated separately for focused EE purpose. This indicator measures the percentage of people with disabilities employed at a point in time against the staff complement e.g. staff complement of 100 target is 2% which equals to 2.	1%	**Department:** Organisational Effectiveness and Innovation **Source document:** EE Stats Report **Contact person:** Sabelo Hlanganisa 021 444 1338
7		Percentage adherence to EE target in all appointments (internal & external)	Formula: Number of EE appointments (external and internal appointments) / Total number of posts filled (external and internal appointments) This indicator measures: 1. External appointments - The number of external appointments across all appointments made by the directorates over the preceding 12 month period. The following job categories are excluded from this measurement: Councillors, students, apprentices, contractors and non-employees. This will be calculated as a percentage based on the organisational EE plan and the directorate EE target. 2. Internal appointments - The number of internal appointments, promotions and advancements over the preceding 12 month period. This will be calculated as a percentage based on the general EE target.	2%	**Department:** Organisational Effectiveness and Innovation **Source document:** EE Stats Report **Contact person:** Sabelo Hlanganisa 021 444 1338

No.	Objective	Key Performance Indicator		WEIGHTING	CONTACT DEPARTMENT
8	5.1 Operational Sustainability	Percentage of absenteeism	The indicator measures the actual number of days absent due to sick, unpaid/unauthorised leave in the department or directorate expressed as a percentage over the number of working days in relation to the number of staff employed. Sick, unpaid/unauthorised leave will include 4 categories namely normal sick leave, unpaid unauthorised leave, leave in lieu of sick leave and unpaid in lieu of sick leave.	2%	**Department:** Human Resources **Source documents:** Quarterly absenteeism report **Contact person:** Charl Prinsloo 021 400 9150
9		Percentage vacancy rate	This is measured as the number of vacant positions expressed as a percentage of the total approved positions on the structure for filling, (vacant positions not available for filling are excluded from the total number of positions). To provide a realistic and measurable vacancy rate the percentage turnover within the Department and Directorate needs to be factored in. Vacancy excludes positions where a contract was issued and the appointment accepted. This indicator will therefore be measured as a target vacancy rate of 7%, (or less), plus the percentage turnover (Turnover: number of terminations over a rolling 12 month period divided by the average number of staff over the same period]. This indicator will further be measured at a specific point in time.	1%	**Department:** Human Resources **Source documents:** Quarterly vacancy report **Contact person:** Yolanda Scholtz 021 400 9249
10		Percentage of Probity functions recommendations implemented	**Internal audit**: Number of Internal Audit (IA) recommendations as per previous audit reports; and/ or number of original tests as per previous continuous audit reports, Minus the number of unresolved recommendations (i.e. recurring) and/ or "failed" tests (i.e. recurring), expressed as a percentage of the number of internal audit recommendations as per previous audit reports and/ or number of original tests as per previous continuous audit reports. **Forensics:** Number of recommendations on the directorate's forensics recommendation register marked as "implemented" by Forensics, as a percentage of the total number of forensic recommendations. This relates to forensic reports issued to the ED that are older than 90 days. Note: The total number of forensic recommendations counted: - Includes recommendations relating to forensic reports issued before 1 July 2017 and not implemented before the commencement of the 2018/2019 financial year; and - excludes recommendations where it was recommended that the investigations be closed. **Risk:** Number of action plans assigned to the ED, due within the quarter ending and marked as "100%" complete based on action owner feedback; expressed as a percentage of the total number of action plans assigned to the ED and due within the quarter ending, excluding the number of duplicated action plans assigned to the ED and due within the quarter ending. **Ethics**: Number of recommendations on the directorate ethics recommendation register marked as "implemented" by Ethics, as a percentage of the total number of ethics recommendations. This relates to ethics reports that are older than 90 days and excludes recommendations where it was recommended that the investigations be "closed". Note: "Closed" means there was no recommended action required by line management. **Ombudsman**: Number of accepted recommendations, marked as implemented by the Ombudsman as a percentage of the total number of accepted recommendations. This relates to recommendations with acceptance dates that are older than 90 days as per reports issued to the ED.	5%	**Department:** Probity **Source documents**: refer to definition **Contact person:** Denise Flack 021 400 9279

No.	Objective	Key Performance Indicator		WEIGHTING	CONTACT DEPARTMENT
11		Percentage budget spent on implementation of Workplace Skills Plan per directorate	A Workplace Skills Plan is a document that outlines the planned education, training and development interventions for the organisation. Its purpose is to formally plan and allocate budget for appropriate training interventions which will address the needs arising out of Local Government's Skills Sector Plan, the City's strategic requirements as contained in the IDP and the individual departmental staffing strategies and individual employees' PDPs. The WSP shall also take into account the Employment Equity Plan, ensuring incorporation of relevant developmental equity interventions into the plan. Formula: Measured against training budget. The measure will be per directorate.	3%	**Department:** Human Resources **Source documents:** WSP report per quarter **Contact person:** Nonzuzo Ntubane 021 400 4056

No.	Objective	Key Performance Indicator		WEIGHTING	CONTACT DEPARTMENT
MUNICIPAL FINANCIAL VIABILITY				**20%**	
12	5.1 Operational Sustainability	Percentage of projects screened in SAP PPM	Projects Screened in SAP PPM for the budget (95%) – per budget cycle for the current fiscal year and next fiscal year, measured at adjustment budget stage and at draft budget stages. Measurement: Metrics extracted from SAP PPM from budget submissions. Screening includes: - Screening Questionnaire - Implementation Complexity Questionnaire - Strategic Themes Questionnaire - GIS Location Mapping	4%	**Department:** Organisational Performance Management: CPPM **Source document:** PPM report **Contact person:** Ben Peters
13		Percentage spend of capital budget	Percentage reflecting year to date spend / Total budget less any contingent liabilities relating to the capital budget. The total budget is the council approved adjusted budget at the time of the measurement. Contingent liabilities are only identified at the year end.	6%	Directorate Finance Manager
14		Percentage of operating budget spent	Formula: Total actual to date as a percentage of the total budget including secondary expenditure.	5%	Directorate Finance Manager
15		Percentage of assets verified	The indicator reflects the percentage of assets verified annually for audit assurance. Quarter one will be the review of the Asset Policy, In Quarter two, the timetable in terms of commencing and finishing times for the process is to be communicated, and will be completed. Both Quarters will only be performed by Corporate Finance. The asset register is an internal data source being the Quix system scanning all assets and uploading them against the SAP data files. Data is downloaded at specific times and is the bases for the assessment of progress. Q1+N/A for ALL other department, except Corporate Finance (responsible) Q1= 25% Corporate Finance Q2= N/A for ALL other department, except Corporate Finance Q2= 50% Corporate Finance Q3= 75% represent that 60% of the assets have been verified by the directorate/ department Q4= 100% represents All assets have been verified.	5%	Directorate Finance Manager
SERVICE DELIVERY/GOOD GOVERNANCE				**44%**	
16	2.1 Safe Communities	2.A Number of new areas with CCTV Surveillance cameras	The number of new areas which have a cctv system or camera/s installed. "An Area is defined as a suburb/location/informal settlement within the City of Cape Town"	10%	ED
17		Number of drivers screened for driving under the influence	This is the number of drivers that are tested by an officer to determine if the driver has consumed any alcohol.	10%	ED
18		Number of Inspections at Scrap Metal Dealers	The Metal Theft Unit, or Copperheads as they are known, is an elite task team of specially trained officers that combat the theft of non-ferrous metals. The unit does not only investigates and responds to incidents of cable / copper theft, that often leads to the arrest of perpetrators which are then handed to SAPS for criminal prosecution, but also conducts unannounced inspections at both scrapyards and so-called 'bucket shops' (informal scrap yards ran illegally from residential premises). These unannounced inspections discourage scrap metal dealers from buying any stolen property. This indicator will show the number of inspections conducted at scrap metal dealers within the boundaries of the City of Cape Town over a 12 month period.	5%	ED

No.	Objective	Key Performance Indicator		WEIGHTING	CONTACT DEPARTMENT
19		Number of liquor premises inspected for compliance in terms of City By-laws and Provincial Legislation	The City's Liquor Enforcement and Compliance Unit polices premises that sell liquor to make sure that they comply with the necessary regulations and legislation, which are the Liquor Act and the city of cape town's control of undertakings that sell liquor to the public by-law. This involves inspecting liquor premises (such as shebeens, pubs and bars) for compliance, closing unlicensed liquor premises and issuing fines for liquor offences (including drunken behaviour in public). This indicator will show the number of inspections conducted at liquor premises within the boundaries of the City of Cape Town over a 12 month period.	10%	ED

No.	Objective	Key Performance Indicator		WEIGHTING	CONTACT DEPARTMENT
20	5.1 Operational Sustainability	Percentage of Capex and Opex items (finance) matched to demand plan items	Percentage of operating and capital line items created on this demand plan for MTREF plan.	1%	The project plan on the operating and capital budget matched to and reflected on the Demand Plan (TTS) by 30 September (90 days) of the start of the MTREF
21		Average turnaround time (16 weeks) of regular tender processes in accordance with demand plan	Average turnaround time (weeks) of regular tender processes in accordance with the demand pan. To increase the through-put of tenders from closing of advert to award of tenders (with fewer than 500 line items (complexity)) above R200 000.	1%	TTS report per directorate measuring turnaround time from closing to awards against the planned 16 weeks
22		Average turnaround time (20 weeks) of complex tender processes in accordance with demand plan	Average turnaround time (weeks) of complex tender processes in accordance with the demand pan. To increase the through-put of tenders from closing of advert to award of tenders (with more than 500 line items (complexity)) above R200 000.	1%	TTS report per directorate measuring turnaround time from closing to awards against the planned 20 weeks
23		Percentage reduction in the number of SCM deviations	The number of deviations (excluding sole single provider deviations and deviations relating to disaster such as fire, floods) reduced year on year (based on previous year's achievement). Number of SCM deviations reduced by the target percentage % year on year for the department/ directorate.	2%	Number of SCM deviations reduced by the target percentage % year on year for the department/ directorate.
24		Percentage spend on repairs and maintenance	Percentage reflecting year to date spend (including secondary cost) / total repairs and maintenance budget Note that the in-year reporting during the financial year will be indicated as a trend (year to date spend). Maintenance is defined as the actions required for an asset to achieve its expected useful life. Planned Maintenance includes asset inspection and measures to prevent known failure modes and can be time or condition-based. Repairs are actions undertaken to restore an asset to its previous condition after failure or damage. Expenses on maintenance and repairs are considered operational expenditure. Primary repairs and maintenance cost refers to Repairs and Maintenance expenditure incurred for labour and materials paid to outside suppliers. Secondary repairs and maintenance cost refers to Repairs and Maintenance expenditure incurred for labour provided In-	4%	Directorate Finance Manager
	SPECIAL PROJECTS			10%	
25	2.1 Safe Communities	Percentage Budget Spent on integrated information management	Monitoring the Annual expenditure against the budget allocated for the enhancement of the EPIC system	5%	ED
26		Initiation of Phase 2 of the on-lime events permitting system.	This indicator measures the progress of the project towards completion of Phase 2 of EPMS	5%	ED

18/7/2018

Executive Director

Richard Bosman

City Manager

Lungelo Mbandazayo

2018 -07- 25

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CORE MANAGEMENT COMPETENCIES
ANNEXURE C

	Core Managerial Competencies	Competency Definitions	Weighting	Quarter 1 30 Sep 2018	Quarter 2 31 Dec 2018	Quarter 3 31 Mar 2019	Quarter 4 30 Jun 2019	Rating ED	Rating Panel
Core Competency Requirements	Moral Competence	Able to identify moral triggers, apply reasoning that promotes honesty and integrity and consistently display behaviour that reflects moral competence.	20%						
	Planning and Organising	Able to plan, prioritise and organise information and resources effectively to ensure the quality of service delivery and built efficient contingency plans to manage risk.	20%						
	Analysis and Innovation	Able to critically analyse information, challenges and trends to establish and implement fact-based solutions that are innovative to improve institutional processes in order to achieve key strategic objectives.	10%						
	Knowledge and Information Management	Able to promote the generation and sharing of knowledge and information through various processes and media, in order to enhance the collective knowledge base of local government.	20%						
	Communication	Able to share information, knowledge and ideas in a clear, focused and concise manner appropriate for the audience in order to effectively convey, persuade and influence stakeholders to achieve the desired outcome.	10%						
	Results and Quality Focus	Able to maintain high quality standards, focus on achieving results and objectives while consistently striving to exceed expectations and encourage others to meet quality standards. Further, to actively monitor and measure results and quality against identified outcomes.	20%						

10/7/2018

Executive Director — **Date**
Richard Bosman

2018 -07- 25

City Manager — **Date**
Lungelo Mbandazayo