

CM55445

2019/2020 Individual Performance Scorecard
CHIEF FINANCIAL OFFICER: KEVIN JACOBY
1 July 2019 - 30 June 2020

PERFORMANCE DASHBOARD

No.	Objective	Key Performance Indicator	Definition	Baseline as of 30 June 2019	Proposed Annual Target	Quarter 1 30 Sep 2019 Target	Quarter 2 31 Dec 2019 Target	Quarter 3 31 Mar 2020 Target	Quarter 4 30 Jun 2020 Target	WEIGHTING	Contact Department
MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION											
MUNICIPAL FINANCIAL VIABILITY											
SERVICE DELIVERY / GOOD GOVERNANCE											
SPECIAL PROJECTS											
MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION											
TRANSVERSAL MANAGEMENT											
1	Organisational culture	Number of Culture assessment interventions held for the year	Number of interventions implemented to address the lowest scoring directorate level attributes resulting from the 2019 organisational culture survey (City Pulse)	New	2	N/A	N/A	N/A	2	1%	Department: Organisational Effectiveness and Innovation Source document: Contact person: Monica Pregnolato 021 400 9221
2	Customer centricity (3.1 Excellence in basic service delivery)	3.A Community satisfaction survey (Score 1 - 5) - City wide	A statistically valid, scientifically defensible score from the annual survey of residents' perceptions of the overall performance of the City's services. The measure is given against the non-symmetrical Likert scale when 1 is poor, 2 is fair, 3 is good, 4 is very good and 5 is excellent. The objective is to improve the current customer satisfaction level	Actual as at 30 June 2019	3	N/A	N/A	N/A	3	2%	Department: Organisational Effectiveness and Innovation Source document: Customer survey results Contact person: Brigitte Morris 021 4003812
3	Transversal Management	Number of prioritised actions in the Resilience Strategy implemented	The prioritised actions will be different for each Directorate in terms of the draft Resilience Strategy, each Directorate have to achieve one. The actions that should be delivered on will be communicated via a memorandum from ED: Corporate Services	New	1	N/A	N/A	N/A	1	1%	Department: Resilience Source document: Memorandum from ED: Corporate Services and Annual results Contact person: Cayley Green 021 400 1257

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					2019/20	Target	Target	Target	Target		
4		Increase in the PPM maturity level based on the PPM Operating Model	The original PPM maturity level is based on the PPM Operating Model maturity assessment that was tabled at EMT during June 2018. The maturity assessment will reflect the maturity at Portfolio and Project level and will occur on an annual basis in order to assess the increase in the maturity level. 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 process * Level 2 – Repeatable Process: Minimum standards for processes and procedures * Level 3 – Defined Process: Defined Process which allow for flexibility and quality requirements * Level 4 – Managed Process: Obtain and retain specific measurements and quality requirements * Level 5 – Optimised Process: Continuous process improvement and proactive technology and problem management for future improvements The EDs for Finance and Corporate Services will be measured on a City-wide maturity level. All other EDs will be measured per the individual directorate. The indicator is cumulative.	2.26 (Actual achieved as at 30 June 2019 - per directorate individual achievement 2.26 + 0.05)	2.31	AT	AT	AT	2.31	1%	Department: Organisational Performance Management: CPPM Source document: PPM assessment Contact person: Ben Peters 021 400 9206
5	Transversal Management	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 - Upload photos (at the start of project, at the end of a project and every 6 month interval)	Actual as at 30 June 2019	95%	95%	95%	95%	95%	1%	Department: Organisational Performance Management: CPPM Source document: PPM report Contact person: Ben Peters
6		Percentage of contracts reported as poor performance out of all assessed contracts per month	Monitoring the performance of contracts under contract management is required in terms of section 116(2) of the MFMA. Contract managers must monitor the performance of the contractor and assess whether they are performing satisfactorily or non-performing on a monthly basis. Finance managers is responsible to confirm monthly monitoring by contract managers. Poor performance depends on the performance of the contractor in terms of the delivering on the scope, time and cost according to the contract. Non-performance is reported to the EMT, City Manager on a monthly basis. Non-performance is also reported to APAC for oversight purposes.	New	<3%	<3%	<3%	<3%	<3%	1%	Department: OPM - Contract Management Source document: CMS (Contract Management System) report to APAC Contact person: Maureen Whare 021 400 9206
7		Percentage of changes made to active contracts	Number of contract changes as a percentage over the total number of contracts per directorate. The goal is to keep contract changes across all contracts to a "healthy" amount (8%) of acceptable changes.	New	≤ 8%	≤ 8%	≤ 8%	≤ 8%	≤ 8%	1%	Department: OPM - Contract Management Source document: CMS (Contract Management System) report to APAC Contact person: Maureen Whare 021 400 9206

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					2019/20						
8	Transversal Management	Percentage non-compliance of contracts with MFMA section 116(3)	Contract managers have to indicate on CMS whether section 116 applies. All contracts, if applicable, must adhere to section 116(3) of the MFMA further rolled out in Directive 22. Non-compliance to section 116(3) give rise to irregular expenditure. Irregular expenditure is defined as expenditure that is in contravention of, or not in accordance with, a requirement of the Local Government: Municipal Finance Management Act 56 of 2003, the Local Government: Municipal Systems Act 32 of 2000, the Remuneration of Public Office Bearers Act 20 of 1998, or the municipality's supply chain management (SCM) policy	New	0%	0%	0%	0%	0%	1%	Office of the City Manager: Gayle Postings Contract Management Unit
9		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 MTRF plan	Actual as at 30 June 2019	75%	75%	75%	75%	75%	1%	Source document: 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 MTRF period. Contact person: Peter De Vries Manager: Demand and Risk Management, Supply Chain Management
10		Average turnaround time (weeks) of regular tender processes in accordance with demand plan	Average turnaround time (weeks) of regular tender processes in accordance with the demand plan. 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	21,96 weeks	22 weeks	22 weeks	22 weeks	22 weeks	22 weeks	1%	Department: SCM Source document: TTS report per directorate measuring turnaround time from closing to awards against the planned weeks. Contact person: Peter De Vries Manager: Demand and Risk Management, Supply Chain Management
11	5.1 Operational Sustainability	Average turnaround time (weeks) of complex tender processes in accordance with demand plan	Average turnaround time (weeks) of complex tender processes in accordance with the demand plan. 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	N/A No complex tenders in Finance	35 weeks	35 weeks	35 weeks	35 weeks	35 weeks	1%	Department: SCM Source document: TTS report per directorate measuring turnaround time from closing to awards against the planned weeks. Contact person: Peter De Vries Manager: Demand and Risk Management, Supply Chain Management
12		Percentage reduction in the number of SCM deviations	The indicator only applies to Supply Chain Management (SCM) deviations above R200 000. Sole/single service provider deviations and deviations relating to disaster such as fires and floods will be excluded from the measurement. This indicator will measure the percentage year on year reduction from the previous year's number of SCM deviations. Formula: (No. of SCM deviations for current year - No. of SCM deviations for prior year) / Number of SCM deviations for prior year x 100	Actual as at 30 June 2019	20%	N/A	N/A	N/A	20%	1%	Department: SCM Source document: Evidence: Formula: Number of SCM deviations reduced by the target percentage % year on year for the department/ directorate. Contact person: Gillian Meyer Manager: Supplier Management & Admin Ser, Supply Chain Management

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MANAGEMENT INDICATORS											
13		Percentage of final Council decisions implemented within timeframes	This indicator excludes all Council decisions for noting. The percentage will be calculated by dividing the number of actions implemented in the period, by the number of final Council decisions allocated to the Directorate in the period. The target remains 100% throughout. If no timeframe was allocated the timeframe is deemed to be one month for implementation. If no timeframe was allocated the timeframe is deemed to be one month for implementation.	New	100%	100%	100%	100%	100%	1%	Each ED is responsible for implementation, evidence and updates to the tracking system Department: OPM Source document: Sharepoint tracking Contact person: Delyno du Toit
14	5.1 Operational Sustainability	Percentage of final Mayco decisions implemented within timeframes	This indicator excludes all Mayco decisions for noting. The percentage will be calculated by dividing the number of actions implemented in the period, by the number of final MAYCO decisions allocated to the Directorate in the period. The target remains 100% throughout. If no timeframe was allocated the timeframe is deemed to be one month for implementation.	New	100%	100%	100%	100%	100%	1%	Each ED is responsible for implementation, evidence and updates to the tracking system Department: OPM Source document: Sharepoint tracking Contact person: Delyno du Toit
15		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	Actual as at 30 June 2019	2%	2%	2%	2%	2%	1%	Department: Organisational Effectiveness and Innovation Source document: EE Stats Report Contact person: Sobelo Hlanganisa 021 444 1338
16	4.3 Building Integrated Communities	Percentage adherence to EE target in all appointments (internal & external) per directorate	Formula: Number of EE appointments (external, internal and disabled appointments) / Total number of posts filled (external, internal and disabled) This indicator measures: 1. External appointments - The number of external appointments across all directorates over the preceding 12 month period. The following job categories are excluded from this measurement: Councilors, students, apprentices, contractors and non-employees. This will be calculated as a percentage based on the general 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. 3. Disabled appointments - The number of people with disabilities employed at a point in time. This excludes foreigners, but includes SA White males with disabilities. Note: If no appointments were made in the period preceding 12 months, the target will be 0%.	Actual as at 30 June 2019	85%	85%	85%	85%	85%	1%	Department: Organisational Effectiveness and Innovation Source document: EE Stats Report Contact person: Sobelo Hlanganisa 021 444 1338

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					2019/20	Target	Target	Target	Target		
17	4.3 Building Integrated Communities	Percentage vacancy rate	"A vacancy rate measures the number of positions in the fixed establishment that is not occupied at any specific point in time. The number of vacant positions is expressed as a percentage of the total approved positions on structure for filling. (vacant positions not available for filling are excluded from the total number of positions). Vacancy excludes positions where a contract was issued and the appointment accepted. The percentage vacancy rate will further be measured at a specific point in time. Determination of the target: To provide a realistic and measurable vacancy rate target two factors had to be considered, the flat rate of 7% plus the percentage turnover within the Department and Directorate. The percentage turnover is calculated as the number of terminations over a 12 month rolling period divided by the average number of staff over the same 12 month rolling average period."	Actual as at 30 June 2019	≤7% + Turnover rate	≤7% + Turnover rate	≤7% + Turnover rate	≤7% + Turnover rate	≤7% + Turnover rate	2%	Department: Human Resources Source documents: Quarterly vacancy report Contact person: Yolanda Scholtz 021 400 9249
18		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 that will address the needs arising out of Local Government's Skills Sector Plan, the IDP, the individual departmental staffing strategies, individual employees' personal development plans and the employment equity plan. Proxy measure for NKPI	Actual as at 30 June 2019	95%	10%	30%	70%	95%	2%	Department: Human Resources Source documents: WSP report per quarter Contact person: Nonzuzo Ntubane 021 400 4056
19	5.1 Operational Sustainability	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.	Actual as at 30 June 2019	85%	85%	85%	85%	85%	2%	Department: Probity Source documents: refer to definition Contact person: Denise Flick 021 400 9279

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			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.								
MUNICIPAL FINANCIAL VIABILITY											
20	5.1 Operational Sustainability	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.	Actual as of 30 June 2019	90%	WW projected cash flow/ total budget	WW projected cash flow/ total budget	WW projected cash flow/ total budget	90%	6%	Directorate Finance Manager
21		Percentage of operating budget spent	Formula: Total actual to date as a percentage of the total budget including secondary expenditure.	Actual as of 30 June 2019	95%	WW projected cash flow/ total budget	WW projected cash flow/ total budget	WW projected cash flow/ total budget	95%	2%	Directorate Finance Manager
22	5.1 Operational Sustainability	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 Q2 = N/A Q3 = 60% of the assets have been verified by the directorate/ department Q4 = 100% represents All assets have been verified. A target of 95% of assets verified will equate to fully effective performance	100%	100%	N/A	N/A	60%	100%	2%	Directorate Finance Manager
SERVICE DELIVERY/GOOD GOVERNANCE											
23	1.1 Positioning Cape Town as a forward looking Globally Competitive City	1.8 Percentage of rates clearance certificates issued within 10 working days	This indicator measures the percentage of rates clearance certificates issued within 10 working days, only once the correct payments and required documentation have been received and verified as correct.	Actual as of 30 June 2019	92%	92%	92%	92%	92%	6%	Director: Revenue
24	5.1 Operational Sustainability	5.A Opinion of independent rating agency	A report which reflects credit worthiness of an institution to repay long-term and short-term liabilities. Credit rating is an analysis of the City's key financial data performed by an independent agency to assess its ability to meet short- and long-term financial obligations. Indicator standard/Norm/Benchmark The highest rating possible for local government which is also subject to the Country's sovereign rating.	Actual as of 30 June 2019	High investment rating	High investment rating	High investment rating	High investment rating	High investment rating	6%	Director: Treasury

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					2019/20	Target	Target	Target	Target		
25		5.B Opinion of the Auditor-General	This indicator measures good governance and accounting practices and will be evaluated and considered by the Auditor General in determining his opinion. An unqualified audit opinion refers to the position where the auditor, having completed his audit, has no reservation as to the fairness of presentation of financial statements and their conformity with General Recognised Accounting Practices. This is referred to as "clean opinion". Alternatively, in relation to a qualified audit opinion, the auditor would issue this opinion in whole, or in part over the financial statement if these are not prepared in accordance with General Recognised Accounting Practice or could not audit one or more areas of the financial statements. Future audit opinions will cover the audit of predetermined objectives.	Actual as at 30 June 2019	Resolved 100% of audit management issues within targeted dates	Submission of Annual Financial Statements and Consolidated Financial Statements	Clean Audit	Resolved 60% of audit management issues within targeted dates	Resolved 100% of audit management issues within targeted dates	6%	Director: Treasury
26		5.E Cash/cost coverage ratio (excluding unspent conditional grants) (NKPI)	The ratio indicates the ability to meet at least its monthly fixed operating commitments from cash and short-term investment without collecting any additional revenue, during that month. Proxy measure for NKPI	Actual as at 30 June 2019	02:01	1:8:1	2:2:1	2:3:1	02:01	6%	Director: Treasury
27		5.F Net Debtors to annual income (NKPI)	Net current debtors are a measurement of the net amounts due to the City for which the anticipation of the recovery is realistic. Proxy measure for NKPI	Actual as at 30 June 2019	21:50%	17:12%	16:98%	22:15%	21:50%	6%	Director: Treasury
28		5.G Debt (total borrowings) to total operating revenue (NKPI)	The purpose of the ratio is to provide assurance that sufficient revenue will be generated to repay liabilities. Proxy measure for NKPI	Actual as at 30 June 2019	28%	25:75%	25:75%	27%	28%	6%	Director: Treasury
29	5.1 Operational Sustainability	Revenue collected as a percentage of billed amount - Rates (CFO)	To measure the receipts as a percentage of billing covering the immediate 12 months period.	Actual as at 30 June 2019	96%	96%	96%	96%	96%	6%	Director: Revenue
30		Progress against major milestones of budget cycle plan to ensure the submission of the 2020/2021 Budget to Council for adoption	Submission of affordable, sustainable and balanced Operating and Capital Budget (MTRF) aligned to the IDP to Council for consideration. Managing the drafting and coordination of Operating and Capital Budget for the City, ensuring alignment to the IDP.	Actual as at 30 June 2019	Submission of 2020/2021 Budget to Council for adoption by 31/05/2020	Initial budget engagement to relevant for a (e.g. SSC)	Modelled determination of major budget assumptions e.g. Tariff increases, growth parameters	Tabled budget at Council by 31/03/2020	Submission of 2020/2021 Budget to Council for adoption by 31/05/2020	6%	Director: Budgets
31		Number of reports submitted indicating regular monitoring, assessment and reporting of relevant in-year financial results	Regular monitoring, assessment and reporting of all relevant financial data sets, advice on corrective action and proposals in respect of variances between budget and progressive actuals. Compliance to relevant legislative frameworks w.r.t. other tiers of government. Under-spending or -recovery of budgetary provisions impacts negatively on municipalities' ability to deliver on its projects and services. Continuous and pro-active steps in monitoring progressive results could address this aspect timeously. In this regard internal procedures managed by the Budget Department (eg. FMR and PCR) is key to highlight variances and propose and implement remedial action towards optimum budget implementation and realisation. Ultimate format and mechanism must be in accordance with municipal budget-related legislation and directives.	3 for 4th quarter, making an Annual Total of 12 reports	Annual Total of 12 reports	3 reports	3 reports	3 reports	3 for 4th quarter, making an Annual Total of 12 reports	6%	Director: Budgets
32		Legal Compliance wrt the implementation of an annual Supplementary Valuation Roll.	Quarter 1: N/A Quarter 2: N/A Quarter 3: N/A Quarter 4: Supplementary Valuation Roll SV01 to GV2018 certified by the Municipal Valuer.	Actual as at 30 June 2019	N/A	N/A	N/A	N/A	Supplementary Valuation Roll SV01 to GV2018 certified by the Municipal Valuer	6%	Director: Valuations

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SPECIAL PROJECTS											
33		Management and resolution of SV03/GV2015 Objections received	Quarter 1: 95% of SV03/GV2015 objections captured into the valuation system. Quarter 2: 25% of SV03/GV2015 objections resolved Quarter 3: 50% of SV03/GV2015 objections resolved Quarter 4: 95% of SV03/GV2015 objections resolved.	New	Management of the SV03/GV2015 objections to ensure 95% are completed by 30 June 2020	95% of SV03/GV2015 objections captured into the valuation system	25% of SV03/GV2015 objections captured into the valuation system	50% of SV03/GV2015 objections captured into the valuation system	95% of SV03/GV2015 objections captured into the valuation system	3%	Director: Valuations
34	5.1 Operational Sustainability	Percentage funding alignment of City Conditional grant funding to Division of Revenue Act and Provincial Gazette prescripts and framework allocations	Percentage, per each conditional grant as defined in both the Divisions of Revenue Act and Gazette, of funding allocation alignment to City budgets.	New	100%	100%	20%	45%	70%	2%	Director: Grant Funding
35		Progress in refining and improving accuracy of Long Term Financial Plan (LTFP) components	The City's Long Term Financial Plan (LTFP) sets out to illustrate that the finances of the City support delivery on the outcomes of the IDP over the short, medium and long term. It furthermore provides a decision base to inform annual or periodic processes associated with the City's MTRF and ancillary strategic / legislative deliverables. The LTFP output goal is to develop sundry scenarios for decision makers at administrative and political levels by illustrating balanced and credible budget positions, sustainable financial results over the medium to long term and demonstrating the establishment of reserves and future public services investment in support of achieving sundry strategic and technical outcomes.	New	Final position papers with recommendations	Identification of different reform aspects	Set up Working Groups to assess potential reforms	Draft position papers on reforms	Final position papers with recommendations	2%	Director: Budgets

Chief Financial Officer

Kevin Jacoby

25.07.2019

Date

City Manager

Lungelo Mbandazayo

2019-07-31

Date

Core Competency Requirements									
Core Managerial Competencies	Competency Definitions	Weighting	Quarter 1 30 Sep 2019	Quarter 2 31 Dec 2019	Quarter 3 31 Mar 2020	Quarter 4 30 Jun 2020	Rating ED	Rating Panel	
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%							


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Kevin Jacoby


City Manager
Lungelo Mbandazayo

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