2023/2024 Executive Director Performance Scorecard: Community Services and Health
Executive Director: Zukiswa Mandlana
1 July 2023 - 30 June 2024

	No.	Objective	Key Performance Indicator	Definition	Baseline 2021/2022	Baseline 2022/2023	Annual Target 2023/2024	Q1 30 Sep 2023 Target	Q2 31 Dec 2023 Target	Q3 31 Mar 2024 Target	Q4 30 Jun 2024 Target	WEIGHTING	Contact Department
	MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION											**20%**	
1	1	Transversal Management	Increase in 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, Programme 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 * 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 Future Planning and Resilience will be measured on a City-wide maturity level. All other EDs will be measured per the individual directorate. <u>Performance rating:</u> Fully effective = achieve increase of 0.1 - 0.2 Significantly above expectation = range between 0.21 - 0.5 Outstanding performance = 0.51 and above	2.91	3.01	3.11	AT	AT	AT	3.11	2%	Department: CPPPM Source document: PPM assessment Contact person: Ben Peters 021 400 9206

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2	2	16. A Capable and Collaborative City Government	Repeatable Tenders that were Expanded/ Amended multiple times (%)	Measures the percentage of Expansions and Amendments on repeatable tenders. This indicator will only measure instances where there was more than one Expansion and/or Amendment on the same tender. Expansions or Amendments are defined by the SCM section 116 (3) guide and can change at any time. **Source:** Contract Register and Monitoring System and Tender Tracking System. Measurement will commence only when the second Expansions and/or Amendments are released in SAP MM and only applies to repeatable tenders that are active in the current FY (i.e. commenced before or in the financial year and expires in or after the FY). Formula: Total number of repeatable tenders expanded and/ or amended multiple times ÷ Total number of repeatable tenders active in the FY. Measured cumulatively. <u>Performance rating:</u> Not fully effective= 2.1% and above Fully effective = 2% Significant performance = range 0.1% - 1.9% Outstanding = 0%	New	New	2%	AT	AT	AT	2%	2%	Department: CPPPM Source document: CMRS (Contract Register and Monitoring System) and Tender Tracking System Contact person: Maureen Whare 069 367 4023
3	3	16. A Capable and Collaborative City Government	Reduction in the number of SCM deviations (%)	**The objective is to achieve a 20% reduction on SCM deviations.** The indicator only applies to Supply Chain Management (SCM) deviations above R200 000 (inclusive of VAT). Sole/single service provider deviations and deviations relating to emergencies will be excluded from the measurement as per section 36 of SCM regulations. The 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" <u>Performance rating:</u> Unacceptable performance= any positive increase in deviations. Not fully effective= decrease deviations between 1% and 19%. Fully effective= decrease deviations by 20%. *Exception: A default performance rating of fully effective will be awarded if you have 2 or less deviations starting from a base of zero.* Significant performance = decrease deviations between 21% and 99%. Outstanding performance = 0 deviations	100%	20%	20%	AT	AT	AT	20%	2%	Department: SCM Source document: SCM deviations schedule Formula: Number of SCM deviations reduced by the target percentage % year on year for the department/ directorate. Contact person: Abu Bakr Moerat SCM: Head of Supplier Management and Administration 021 400 3007

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4	4	16. A Capable and Collaborative City Government	Reduction in the number and value of irregular expenditure identified for the Directorate (year-on-year) (average %)	**The objective is to achieve a 50% reduction on irregular expenditure.** The indicator will measure the average percentage reduction in the number and value of irregular expenditure i.e. contravention of legislation as defined in the irregular expenditure definition. 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. Indicator will measure Irregular expenditure that arose only in the time of employment of the ED. Irregular expenditure will be measured based on the financial year in which it is disclosed. Irregular expenditure is based on self-disclosure or detected by an assurance provider (including AGSA) for the current financial year and the year preceding the current financial year where the ED was accountable for the directorate. Formula: (Non-compliance Instances for the current year – Non-compliance instances for prior year)/ Non-compliance instance for prior year X 100" + (Irregular expenditure amount for current year – Irregular expenditure amount for prior year)/ Irregular expenditure amount for prior year X 100" / 2 Refer to table below for guidance on calculation: <u>Performance rating:</u> Not fully effective = a reduction of above 0% and less than 50% Fully effective = a reduction between 50%-99% Outstanding = 100% reduction or 0 instances E16	30.57%	50%	50%	AT	AT	AT	50%	2%	Department: City Manager Office Source document: Irregular Register and the AG's findings **in the quarter that it is available**. Contact person: Gayle Postings 021 400 1268

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					2021/2022	2022/2023	2023/2024	Target	Target	Target	Target		
5	5	16. A Capable and Collaborative City Government	External audit (Auditor General) audit actions completed as per audit action plan (%)	This indicator measures how many actions was completed in the financial cycle within in the unique deadline set, as per the audit action plan. The Audit Action Plan sets out the total number audit actions required to address the internal control deficiencies as identified by the Auditor-General in their management report. Completed would mean that the actions as stipulated in the audit action plan has been executed by the relevant ED and/or Director. Should there be no actions required for an Executive Director and/or Director the indicator will not be applicable. <u>Performance rating:</u> Outstanding =100% No scores for fully effective and significant.	N/A	100%	100%	100%	100%	100%	100%	2%	Department: Investor Relations Source document: Completed Audit Action plan Contact person: Lynn Fortune:021 400 5987

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6	6	16. A Capable and Collaborative City Government	Final Council decisions implemented within timeframes (%)	The indicator excludes all council decisions for noting. Decisions taken by council where there is no budget to implement actions or outside of the control of the ED. These exclusions must be supported by valid evidence. These decisions must be reflected on each quarterly report for the City Manager and/or panel's awareness. All final Council decisions allocated to the ED with implementation date for the quarter must be implemented and reported on for the quarter to achieve the target. Implementation that runs over a period longer than a financial year will be measured according to milestones identified for implementation within the current financial year. Each ED must ensure that a date is allocated of when action will be completed and implemented. This must be captured in the CDIT system by the relevant implementer. If no timeframe was allocated the timeframe is deemed to be one month for implementation. Implementation is the date of completion of the actions or achievement of councils request or expectation. Weighting must be reallocated where there were **no council decisions** for the year. <u>Performance rating:</u> Outstanding performance= 100% Score of 5 and scoring will apply downwards where decisions were not implemented. Significant performance= range between 99% - 80% of ALL decisions Fully effective= range between 79% -70% of ALL decisions Below 70% not effective	100%	100%	100%	100%	100%	100%	100%	1%	Each ED is responsible for implementation, evidence and updates to the tracking system. Source document: SharePoint tracking Tracking System contact person: Rehana Razack (021 400 1246) **Weighting must be reallocated where there were no council decisions for the year.**

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7	7	16. A Capable and Collaborative City Government	Final MAYCO decisions implemented within timeframes (%)	The indicator excludes all MAYCO decisions for noting. Decisions taken by mayco where there is no budget to implement actions or outside of the control of the ED. These exclusions must be supported by valid evidence. These decisions must be reflected on each quarterly report for the City Manager and/or panel's awareness. All final MAYCO decisions allocated to the ED with implementation date for the quarter must be implemented and reported on for the quarter to achieve the target. Implementation that runs over a period longer than a financial year will be measured according to milestones identified for implementation within the current financial year. Each ED must ensure that a date is allocated of when action will be completed and implemented. This must be captured in the CDIT system by the relevant implementer. If no timeframe was allocated the timeframe is deemed to be one month for implementation. Implementation is the date of completion of the actions or of achievement of mayco's request or expectation. Weighting must be reallocated where there were no mayco decisions for the year. <u>Performance rating:</u> Outstanding performance= 100% Score of 5 and scoring will apply downwards where decisions were not implemented. Significant performance= range between 99% - 80% of ALL decisions Fully effective= range between 79% -70% of ALL decisions Below 70% not effective	100%	100%	100%	100%	100%	100%	100%	1%	Each ED is responsible for implementation, evidence and updates to the tracking system. Source document: SharePoint tracking Tracking System contact person: Rehana Razack (021 400 1246) **Weighting must be reallocated where there were no mayco decisions for the year.**

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8	8	16. A Capable and Collaborative City Government	16.J Budget spent on implementation of Workplace Skills Plan (%)	Measures the percentage of budget spent on the Workplace Skills Plan .The Workplace Skills Plan 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 per MSA Regulation 10(f). Formula: % spent on the implementation of the WSP measured against the training budget. (A/B)*100 A: Actual spend per quarter on training budget B: Planned spend on training Budget for the year Performance rating: Fully effective = 90% - 95% Significant performance=between range of 96% to 98% Outstanding performance= 99% and above	99.4%	90%	90%	10%	30%	60%	90%	1%	Source documents: WSP report per quarter Contact person: Nonzuzo Ntubane 021 400 4056
9	9	16. A Capable and Collaborative City Government	Internal independent assurance provider's functions recommendations implemented (%)	It is the monitoring and reporting of the implementation (expressed as a percentage) of corrective actions to address internal independent assurance providers' recommendations, issued within the directorate of the responsible Executive Director. The internal independent assurance providers included in this KPI are **Internal Audit, Ombudsman, Integrated Risk Management, Ethics and Forensics departments.** Each internal independent assurance provider as mentioned above has their own unique input to this KPI. This KPI will be "not applicable" to management when there are no recommendations, thus only those that could provide inputs will be included in the calculation. <u>Performance rating:</u> Fully effective = 85% - 90% Significant performance = between range of 91% to 94% Outstanding performance= 95% and above	83%	85%	85%	85%	85%	85%	85%	1%	Department: Office of City Manager Source documents: refer to definition Contact person: Babalwa Mothibi

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10	10	16. A Capable and Collaborative City Government	16.A Community satisfaction city-wide survey(score 1-5)	Measures the score on the Community satisfaction City-wide survey. A statistically valid, scientifically defensible score from the annual survey of residents' perceptions of the overall performance of the City's. The measure is given against a non-symmetrical Likert scale, where 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. <u>Performance rating:</u> Fully effective = 2.8 - 2.9 Significant performance = between range of 3.0 - 3.1 Outstanding performance = 3.1 and above	2.5	2.8	2.9	A/T	A/T	A/T	2.9	2%	Department: Organisational Effectiveness and Innovation Source document: Community Satisfaction survey score Contact person: Brigette Morris 021 400 3812
11	11	16. A Capable and Collaborative City Government	Inclusion of C88 **output** indicators (%)	All Tier 1 and Tier 2 Circular 88 output indicators to be **included** into the performance scorecards of the Executive Directors, **where relevant**. All indicators must be included verbatim into the corporate and **Directorate** SDBIP and the measurement must be in compliance with the technical indicator descriptions (TID) as issued by National Treasury. (Target is annual due to the fact that amendments can only be made in the mid-year scorecards) Formula: Percentage: Total number of Tier 1& 2 included **in** the directorate **SDBIP** divided by Tier 1 & 2 required for inclusion as per C88 Performance rating: Fully effective = 90% - 99% inclusion of Tier 1&2 Significant performance = 100% inclusion of Tier 1&2	New	New	100%	AT (YTD progress)	AT (YTD progress)	AT (YTD progress)	100%	1%	Department: Organisational Performance Management (OPM) Source document: C88 scorecard/ **Directorate** SDBIP Contact person: Monique Fillies - Manager: City Performance Management 021 400 9024

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12	12	16. A Capable and Collaborative City Government	Average of tenders in slippage at any given quarter end (%)	Measures the average of tenders for MTREF in slippage at any given quarter end. This will drive the timeous implementation of the demand plan based on the agreed timeline. Abnormalities in the timeline will then impact each step of the process, such as where a tender only allows 30 days after award to Contract Required by Date (CRD), there will probably be a contract gap or a Value At Risk (VAR – Budget at risk of not being spent) on the Capital reporting. Slippage is defined as tenders on the demand plan which are behind schedule based on the agreed timelines for each tender. Slippage in the implementation of the demand plan, is a contributor to the cause of VAR. This will include the submission of draft specifications as per the minimum timeframe before the CRD. Formula: Total count of tenders in red or amber as a percentage of the total number of tenders required for the MTREF period (average %). Performance rating: Fully effective = 9% - 10% Significant performance = ≥ 5% - < 9% Outstanding performance = < 5%	New	New	≤10%	≤10%	≤10%	≤10%	≤10%	1%	Department: Supply Chain Management Source document: Demand Plan Overview Contact person: Bekumuzi Vumase - Manager Demand Management
13	13	16. A Capable and Collaborative City Government	Gaps in repeatable tender continuity (average number of days)	This indicator is to ensure continued monthly service delivery implemented through repeatable tenders. Potential gaps should be mitigated via extension/expansion and/or deviation early enough so that it caters for any possible delay within a tender process. A gap less than one month will be included in the calculation. To drive the demand plan and improve Supply Chain Management (SCM) process and service delivery. Formula: Total number of gaps in days/ Total number of tenders with a gap of more than zero days = Average number of gaps (days) (Effectively the report should be 'blank'.) Using the gap report developed by Zubair which takes current status and projected time for completion into account. Performance rating: Fully effective = repeatable tenders with gaps with > 30 days ≤ 90 days Significant performance = repeatable tenders with gaps with ≤ 30 days Outstanding performance = zero repeatable tenders with gaps	New	New	0	0	0	0	0	1%	Department: CPPPM Source document: GAP report prepared by Zubair Contact person: Zubair Adams

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					2021/2022	2022/2023	2023/2024	Target	Target	Target	Target		
14	14	16. A Capable and Collaborative City Government	Memorandum of Agreements (MOA) submitted to Legal for vetting prior to BAC (%)	Measures the percentage of MOAs submitted to Legal for vetting prior to BAC decision. (This is 100% within the control of the Directorate and contributes to the efficiency of the process by overlapping the vetting with the award and appeal period) Formula: Progressive per quarter using the Post Award Tracker based on all awards made by BAC in a financial year for that Directorate. Performance rating: Fully effective = 95% - 96% Significant performance = 97% - 98% Outstanding performance = above 98%	New	New	95%	95%	95%	95%	95%	1%	Department: CPPPM Source document: Post award tracker prepared by Zubair Contact person: Zubair Adams
		MUNICIPAL FINANCIAL VIABILITY										10%	
15	1	16. A Capable and Collaborative City Government	16.D Spend of capital budget (%) (NKPI)	Measures the extent to which capital expenditure has been spent based on the **original** budget during the financial year. Capital expenditure is all costs incurred by the municipality to acquire, upgrade, and renew physical assets such as property, plants, buildings, technology, or equipment. Proxy measure for NKPI per MSA Regulation 10(c). Proxy measure for C88 FM1.11 <u>Performance rating:</u> Fully effective = 90% - 93% Significant performance = range between >93% - 96% Outstanding performance = above 96%	91.1%	90%	90%	15.2%	29.4%	48.9%	90%	6%	Directorate Finance Manager

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16	2	16. A Capable and Collaborative City Government	Operating budget spend (%)	This indicator measures the total actual expenditure to date as a percentage of the total budget including secondary expenditure. Performance rating: Fully effective = 95 - 96% Significant performance= range between >96% - 97% Outstanding performance= above 97%	97.4%	95%	95%	22.1%	47.4%	71.0%	95%	4%	Directorate Finance Manager
		SERVICE DELIVERY/GOOD GOVERNANCE										60%	
17	1	OBJ 11: Quality and safe parks and recreation facilities supported by community partnerships. CSC & Mayoral Request	11. A Recreation & Parks open spaces mowed according to Annual Mowing Plan (%)	This indicator measures the percentage implementation of the R&P Dept. public open space mowing during the year, compared to the Annual Mowing Plan. The minimum mowing cycles and ability to meet the 80% target are directly linked to the budget available for the project. The measurement is frequency of actual mowing vs planned mowing. Performance rating: Unacceptable performance = below 75% Not fully effective = 76 -81% Fully effective = 82% Significant performance = 82-86% Outstanding performance = more than 86%	New	80%	82%	A/T	A/T	A/T	82%	6%	Director: Recreation & Parks
18	2	OBJ 9: Healthy and sustainable environment	9. C Severe/Moderate dehydration in children under the age of five presenting at City health facilities with diarrhoea (%)	This indicator measures the proportion of children under 5 years with diarrhea presenting to City Health facilities, that have severe or moderate dehydration. Numerator: number of children <5 with diarrhoea presenting to city health facilities, with severe or moderate dehydration Denominator: total number of children <5 with diarrhea presenting to city health facilities Performance rating: Unacceptable performance = more than 5.4% Not fully effective = 5.4 - 5.2% Fully effective = <5.1% Significant performance = 4.9 - 5% Outstanding performance = below 4.9%	New	<5.2%	<5.1%	A/T	A/T	A/T	<5.1%	6%	Director: City Health

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19	3	OBJ 11: Quality and safe parks and recreation facilities supported by community partnerships C88	Library visits per library (average number)	Utilisation rate is indicative of the supply and demand for community facilities such as libraries. It can be used to inform planning and performance of facilities. The number of visits is a direct measure of utilisation, whether to access books or to use the space for one of its other community functions. Performance rating: Unacceptable performance = below 63 000 Not fully effective = 63 000 - 64 999 Fully effective = 65 000 average Significant performance = 65 001 - 66 000 Outstanding performance = more than 66 000	32000	65000	65000	A/T	A/T	A/T	65000	6%	Director: LIS
20	4	OBJ 16: A Capable and Collaborative City Government	Eligible ECD registration applications processed on the ECD Modernization tool (%)	The indictor measures the percentage of unregistered ECD Centres with NPO registration applications initiated using the City's online ECD Modernisation Tool. The ECD Modernisation Tool enables the various CCT departments (Spatial Planning, Fire and Safety, Environmental Health and SDECD) responsible for City ECD compliance matters to work collectively in order to fast track processes leading to the ECD Centres' registration with the Provincial Department of Social Development. Performance rating: Unacceptable performance = 0%- 49% Not fully effective = 50%- 99% Fully effective = 100% No scores for significant and outstanding performance.	100%	100%	100%	100%	100%	100%	100%	6%	Director: SD&ECD

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21	5	OBJ 9: Healthy and sustainable environment	Health & Hygiene interventions related to informal settlements completed (number)	Number of Health & Hygiene interventions related to informal settlements completed. This target includes transversal projects. This target is based on number of informal settlements in the current financial year. Health and Hygiene interventions are projects run by environmental health within communities which educate the communities on various topics. These aim to improve the knowledge of the community on health and hygiene issues which affect their lives. Interventions may be pre planned or in response to a specific incident eg outbreak. Performance rating: Unacceptable performance = below 1100 Not fully effective = 1100 - 1149 Fully effective = 1150 Significant performance = 1151 - 1200 Outstanding performance = above 1200	New	New	1150	288	576	864	1150	6%	Director: City Health
22	6	OBJ 9: Healthy and sustainable environment	Days when air pollution exceeds RSA Ambient Air Quality Standards (number)	Any day when any one of the criteria pollutants at any one of up to a maximum of 14* air quality monitoring stations in the City exceeds RSA daily Ambient Air Quality Standards. Layman Description: The number of days where one of the identified air pollution particles or gases is above the levels set by the RSA Ambient Air Quality Standards. Performance rating: Unacceptable performance = above 76 Not fully effective = 69 - 76 Fully effective = 68 Significant performance = 60 - 67 Outstanding performance = below 60	≤ 40	≤ 68	≤ 68	≤ 17	≤ 34	≤ 51	≤ 68	6%	Director: City Health

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23	7	OBJ 15: A more spatially integrated and inclusive city	Give Dignity awareness initiatives (number)	Measures the number of awareness raising campaigns City wide to reduce the prevalence of persons migrating and living on the street . The initiatives will raise awareness around the Inhumane conditions of people living on the street through the enabling of communities provision of giving indiscriminant handouts, giving with dignity, however, not limited to: 1. Print media Campaign (1per quarter) 2. Social Media Campaign (Annually - 2nd quarter) 3. Business Sensitisation (Annually - 2nd quarter) 4. Lamp posts (2 -2nd and 4th quarter) 5. Public awareness sessions <u>Performance rating</u>: Unacceptable performance = below 85 Not fully effective = 85-89 Fully effective = 90 Significant performance = 91-95 Outstanding performance = more than 95	New	90	90	22	44	66	90	6%	Director: SD&ECD
24	8	OBJ 9: Healthy and sustainable environment	Persons living with diabetes, attending CCT Health facilities, having an HBa1C (long term blood glucose test) evaluated in the past year (%)	Numerator: number of clients living with diabetes attending CCT health facilities with a record of an HBa1C blood test being conducted in the past FY Denominator: number of clients living with diabetes attending CCT health facilities in the past FY Performance rating: Unacceptable performance = below 60% Not fully effective = 60 - 64% Fully effective = 65% Significant performance = 66 - 70% Outstanding performance = more than 70%	New	New	65%	65%	65%	65%	65%	6%	Director: City Health

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25	9	OBJ 11: Quality and safe parks and recreation facilities supported by community partnerships	Identified facilities maintained in line with the Netball Priority/Legacy Infrastructure Programme (number)	This indicator measures the Recreation & Parks Department's planned 2023-2024 repairs & maintenance of netball courts at identified facilities in line with the Netball Priority/Legacy Infrastructure Programme. Identified facilities: 1. Langa Indoor Sport Complex (Facility category 1 - Community Facility) 2. 14th Avenue Sportsfield (Facility category 1 - Community Facility) 3. Bloekombos Sportsground (Facility category 1 - Community Facility) 4. Durbanville Sportsground (Facility category 2 - Sub Area Facility) 5. William Herbert (Facility category 3 - Area/Regional facility) 6. Portlands Sportsfield (Facility category 1 - Community facility) 7. Weltevreden Valley Sportsfield (Facility category 1 - Community facility) 8. Beacon Valley Community Centre (Facility category 1 - Community facility) 9. Philippi Indoor Sports Centre (Facility category 2 - Sub-area facility) Performance rating: Unacceptable performance = below 7 Not fully effective = 7- 8 Fully effective = 9 Significant performance = 10 - 12 Outstanding performance = more than 12	New	New	9	A/T	A/T	A/T	9	6%	Director: Recreation & Parks
26	10	OBJ 16: A Capable and Collaborative City Government	Implementation of Phase 2 (Mobile solution) of the Environmental Health System (number)	Measures the number of Community Services and Health IT Initiative projects implemented that improve the ease of doing business. Community Services and Health IT Initiative project is a multi-year project in which the Corporate IT department plays a vital role. Performance rating: Not fully effective = 0 Fully effective = 1 Significant performance = more than 1	3	4	1	A/T	A/T	A/T	1	6%	Manager: PD&PMO

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					2021/2022	2022/2023	2023/2024	Target	Target	Target	Target		
				SPECIAL PROJECTS								**10%**	
27	1	CM request CM memo	**Staff housing population verified, per directorate (%)**	Measures the percentage of Staff Housing population verified by confirming occupancy, operational need, and conditions as per the approved allocation list, as compiled by the Directorate coordinators to ensure validity, accuracy and completeness by conducting an annual site visits to confirm staff occupancy against the approved list. The approved list must include the following: • Property occupancy – staff member confirmed, including staff number. • Need for staff member to occupy property i.e. operational need. • Lease number and tenure. • Rental value. • Fringe benefit registration, confirmed with Payroll. • Annual site visit records (pictures) to confirm occupancy and property conditions. • Escalation intervention requests, where property conditions place tenants at risk. Performance rating: Unacceptable performance = below 50% Not fully effective = 50 - 89% Fully effective = 90 - 99% Significant performance = 100%	New	50%	100%	60%	75%	90%	100%	2%	Director: Recreation & Parks

	No.	Objective	Key Performance Indicator	Definition	Baseline 2021/2022	Baseline 2022/2023	Annual Target 2023/2024	Q1 30 Sep 2023 Target	Q2 31 Dec 2023 Target	Q3 31 Mar 2024 Target	Q4 30 Jun 2024 Target	WEIGHTING	Contact Department
28	2	1. Increased Jobs and Investment in the Cape Town economy Mayoral Priority Programme	Average time taken to finalise business license applications (LED3.11)	The indicator measures the average number of working days a business owner can be expected to wait from the date of submission of a complete business license aplication to the date of outcome of licensing decision from the municipality. Business License applications refer to those businesses applying in terms of the Business Act of 1991. A 'complete application" refers to the point at which all of the required administartive information has been suplied, allowing the municipality to proceed with thee processing. A 'finalised' application refers to an application where the municipality has taken a decision to approve or deny the application. An application is considered finalised at the point of the decision, regardless of the time between the decision and the communication of the application outcome. Performance rating: Fully effective: 155 -150 Significantly performance = a range between >140 - <150 of all targets achieved Outstanding performance = less than 140	191.22	155	155	155	155	155	155	2%	Director: City Health
29	3	MFMA compliance	Completion of MFMA Competency by Executive Directors (%)	The indicator measures the adherence to the MFMA. Section 16 of the MFMA requires Executive Directors (EDs) to meet the minimum competency levels. The attainment of competency levels must be obtained within prescribed timeframes and must be included in performance agreements. EDs have 18 months to complete, which commences on date that contract was signed. Within the 18 month period the 100% target will represent the modules completed for the year. Amendment to improve accuracy of indicator and provide clarity in terms of what should be excluded from calculation. <u>Performance rating:</u> Fully effective = 100%	New	100%	100%	N/A	N/A	N/A	100%	0%	Compulsory for all EDs that have not completed the MFMA competency and/ or have outstanding modules. Zero rated weighting.

	No.	Objective	Key Performance Indicator	Definition	Baseline 2021/2022	Baseline 2022/2023	Annual Target 2023/2024	Q1 30 Sep 2023 Target	Q2 31 Dec 2023 Target	Q3 31 Mar 2024 Target	Q4 30 Jun 2024 Target	WEIGHTING	Contact Department
30	4	SMF/COVID-19	Establish additional Safe Spaces (number)	This indicator will measure the number of additional safe spaces establish in the 2023/24 financial year Performance rating: Unacceptable performance = 0 Not fully effective = 1 Fully effective = 2 Significant performance = 3 Outstanding performance = above 3	New	New	2	0	0	0	2	2%	Director: SD&ECD
31	5	Less Formal Township Establishment Act (LFTEA) to broadly cover the areas of informality	Health hazards identified that have been escalated to internal line departments (%)	Number of health hazards identified by Health during weekly assessments of informal settlements. (source document – weekly informal settlement assessment sheet.) Number of service requests directed to applicable line departments responsible for addressing health hazard. (C3 reference number) Performance rating: Unacceptable performance = below 90% Not fully effective = 90-94% Fully effective = 95% Significant performance = 96-99% Outstanding performance = 100%	95%	95%	95%	95%	95%	95%	95%	2%	Director: City Health
31	6	Unlawful Land Occupation (ULO)	*Unlawful Land Occupation (ULO)* : Identified Recreation & Parks sites where legal action for interdicts/eviction has been **initiated** (number)	This indicator measures the number of initiations by Recreation and Parks, for legal action (interdicts/evictions) to proceed. It is a count of the number of "applications" handed over to Legal Services for response. Performance rating: Unacceptable performance = below 10 Not fully effective = 10-11 Fully effective = 12 Significant performance = 13-14 Outstanding performance = more than 14	New	12	12	3	6	9	12	2%	Director: Recreation & Parks

Zukiswa Mandlana

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Executive Director:
Community Services & Health
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City Manager:
Lungelo Mbandazayo

Date