

CME6926

No.	Objective	Key Performance Indicator	Definition	Baseline as of 30 June 2019	Proposed Annual Target 2019/20	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: To be provided by each ED as this will vary based on the type of intervention. Contact person: Monica Mashele 021 400 2221
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 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.	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: Bridgette Morris 021 400 3812
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: Corley Green 021 400 1257
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 EMF during June 2018. The maturity assessment will reflect the maturity of 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 • 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.	2.26 (Actual achieved as of 30 June 2019 - per directorate individual achievement) 2.26 +0.05	2.31	AT	AT	AT	2.31	1%	Department: Organisational Performance Management: CPM Source document: PPM assessment Contact person: Ben Peters 021 400 9206
5		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: CPM Source document: PPM report Contact person: Ben Peters 021 400 9206
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 EMF, 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 5204
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 5204

PERFORMANCE DASHBOARD

No.	Objective	Key Performance Indicator	Definition	Baseline as of 30 June 2019	Proposed Annual Target 2019/20	Quarter 1 Target 30 Sep 2019	Quarter 2 Target 31 Dec 2019	Quarter 3 Target 31 Mar 2020	Quarter 4 Target 30 Jun 2020	WEIGHTING	Contact Department
8		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%	Department: OPM - Contract Management Source document: CMS (Contract Management System) report to EMT Contact person: Mavreen Whare 021 400 5204
9		Percentage of Capex and Opex items (finance) matched to demand plan items	Percentage of operating and capital line items created on the 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 (TPS) 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 021 400 2813
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.	25.3 weeks	22 weeks	22 weeks	22 weeks	22 weeks	22 weeks	1%	Source document: TPS 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 021 400 2813
11		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.	39.4 weeks	35 weeks	35 weeks	35 weeks	35 weeks	35 weeks	1%	Source document: TPS 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 021 400 2813
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 disasters such as fires and floods will be excluded from the measurement. 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) / No. of SCM deviations for prior year x 100	Actual as at 30 June 2019	20%	N/A	N/A	N/A	20%	1%	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 Services, Supply Chain Management 021 400 2007
MANAGEMENT INDICATORS											
13		Percentage of final council decisions implemented within timeframes	The indicator excludes all council decisions for rolling. 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 time-frame 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 021 400 7154
14		Percentage of final mayco decisions implemented within timeframes	The indicator excludes all mayco decisions for rolling. 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 021 400 7154
15	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 equates 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: Sabelo Hlangana 021 444 1338

No.	Objective	Key Performance Indicator	Definition	Baseline as of 30 June 2019	Proposed Annual Target	Quarter 1 30 Sep 2019	Quarter 2 31 Dec 2019	Quarter 3 31 Mar 2020	Quarter 4 30 Jun 2020	WEIGHTING	Contact Department
				2019/20	Target	Target	Target	Target	Target		
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 of 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 of 30 June 2019	85%	85%	85%	85%	85%	1%	Department: Organisational Effectiveness and Innovation Source document: EE Stats Report Contact person: Sabalo Mhangatha 021 444 1338
17		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 of 30 June 2019	57% + Turnover rate	57% + Turnover rate	57% + Turnover rate	57% + Turnover rate	57% + Turnover rate	2%	Department: Human Resources Source document: 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 employee's personal development plans and the employment equity plan. Proxy measure for (NKP)	Actual as of 30 June 2019	95%	10%	30%	70%	95%	2%	Department: Human Resources Source document: WSP report per quarter Contact person: Nonuzo Ntubone 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. recuring) and/ or "closed" tests (i.e. recuring), 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 report. Forensics: Number of recommendations on the directorate's forensic 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 report issued to the ED.	Actual as of 30 June 2019	85%	85%	85%	85%	85%	2%	Department: Probity Source documents: refer to definition Contact person: Denise Rock 021 400 9279

ASH

No.	Objective	Key Performance Indicator	Definition	Baseline as of 30 June 2019	Proposed Annual Target 2019/20	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 FINANCIAL VIABILITY											
20		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 at 30 June 2019	90%	UM projected cash flow/ total budget	UM projected cash flow/ total budget	UM projected cash flow/ total budget	90%	6%	Contact Person: Directorate Finance Manager - Avri De Klerk Tel: 021 400 3882
21		Percentage of operating budget spent	Formula: Total actual to date as a percentage of the total budget including secondary expenditure.	Actual as at 30 June 2019	95%	22%	47%	77%	95%	2%	Contact Person: Directorate Finance Manager - Avri De Klerk Tel: 021 400 3882
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 Qux system scanning all assets and uploading them against the SAP data files. Data is downloaded at specific times and is the basis 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 75% of assets verified will equate to fully effective performance	Actual as at 30 June 2019	100%	N/A	N/A	60%	100%	2%	Contact Person: Directorate Finance Manager - Avri De Klerk Tel: 021 400 3882
SERVICE DELIVERY/GOOD GOVERNANCE											
23	1.1 Positioning Cape Town as forward looking globally competitive City	Percentage progress on Ward Allocation Projects implemented within Urban Management Areas 1 - 4	The number of ward allocation projects implemented divided by the total number of ward allocation projects that have commenced and/or are completed, i.e. Projects assigned (actual + committed). The quarter 4 result will reflect the actions achieved only.	Actual as at 30 June 2019	95%	12%	40%	60%	95%	10%	Contact Person: Area Director 1 - 4 Wilfred Solomon Johannes - 021 400 1365 Alejo Bosman - 021 444 8696 Freddie Prince - 021 444 7521 Luzuko Mdunyiswa - 021 400 2358
24	4.3 Building Integrated Communities	Percentage of planned public participation processes completed	Public participation processes registered by the department and successfully implemented and facilitated by the Public Participation Unit.	Actual as at 30 June 2019	100%	100%	100%	100%	100%	10%	Contact Person: Irvin Robson Tel: 021 400 3779
25	5.1 Operational Sustainability	Percentage of ward committees with 6 or more ward committee members (excluding the ward councillor) (Circular 88)	The percentage of ward committees that had 6 or more members, excluding the ward councillor, as a proportion of the total number of wards at the last day of the reporting period.	Actual as at 30 June 2019	80%	80%	80%	80%	80%	8%	Contact Person: Catherine Oremwenyer Tel: 021 400 5522
26	1.3 Economic Inclusion	Citywide : Facilitate the creation of the agreed MUCP opportunities as per Departmental Project Plans	Refers to paid work created for an individual on an EPWP project for any period of time, within the employment conditions of the Code of Good Practice for the Expanded Public Works Programme.	Actual as at 30 June 2019	35 500	8 875	17 750	26 625	35 500	8%	Contact Person: Region Melody Tel: 021 444 9548
27	2.1 Safe Communities	Completion and approval of Community Action Plans for the designated MUCP areas.	A Community Action Plan, CAP is an area strategy made up of short, medium and long term actions within prioritised sectors to be undertaken in the MUCP areas which will guide strategic investment and activities within the respective areas. It is formulated through engagements and workshops with the community, City line Departments and other interested parties and is informed by a comprehensive baseline survey. It is a plan which is therefore founded on evidence and data that is locally generated and owned by the community. This is overlaid with the knowledge within the public sector. Thus both stakeholders are now able to own a joint development plan via the various Area Coordinating Teams, ACT's. Once there is consensus, the plan will be elevated via the ACT and the respective line departments to the Sub Councils and the Mayoral Urban Regeneration Sub Committee and ultimately into the mainstream IDP system. This will ensure community ownership of this layer of the IDP which will make it a powerful tool for leveraging change and improvement within identified strategic investment zones via the MUCP programme.	Actual as at 30 June 2019	4	0	1	3	4	2%	Contact Person: Alejo Bosman Tel: 021 400 4576
28	4.3 Building Integrated Communities	Percentage increase Community Based Vendors Registration Programme	The indicator measures the increase in registered Community Based Vendors per annum. The aim is to enable a Community Based Vendors Programme which will lead to statistical growth in the number of Community Based Vendors registered per annum i.e. statistical growth of at least 7% per annum on the previous financial year's statistics.	Actual as at 30 June 2019	50%	20%	30%	40%	50%	5%	Contact Person: Area Directors 1 - 4 Wilfred Solomon Johannes - 021 400 1365 Alejo Bosman - 021 444 8696 Freddie Prince - 021 444 7521 Luzuko Mdunyiswa - 021 400 2358
29	4.3 Building Integrated Communities	Number of new trading opportunities created: 4 pilot sites per area	Number of additional informal trading sites developed.	Actual as at 30 June 2019	16	4	8	12	16	1%	Contact Person: Area Directors 1 - 4 Wilfred Solomon Johannes - 021 400 1365 Alejo Bosman - 021 444 8696 Freddie Prince - 021 444 7521 Luzuko Mdunyiswa - 021 400 2358

ABC

No.	Objective	Key Performance Indicator	Definition	Baseline as of 30 June 2019	Proposed Annual Target	Quarter 1 30 Sep 2019	Quarter 2 31 Dec 2019	Quarter 3 31 Mar 2020	Quarter 4 30 Jun 2020	WEIGHTING	Contact Department
					2019/20	Target	Target	Target	Target		
30	5.1 Operational Sustainability	CID Payment ratios >95%	Monitor CID payment ratios and initiate credit control interventions when less than 95%.	Actual as at 30 June 2019	CID payment ratio >95%	Monitor CID payment ratios and initiate credit control interventions	Monitor CID payment ratios and initiate credit control interventions	Monitor CID payment ratios and initiate credit control interventions	CID payment ratio >95%	10%	Contact Person: Eddie Scott Tel: 021 400 1872
31	4.3 Building Integrated Communities	Number of areas identified for public participation interventions	To ensure pro-active ward based interventions with line departments by identifying and addressing the burning issues within specific wards.	Actual as at 30 June 2019	116	24	70	82	116	6%	Contact Person: Irvin Robson Tel: 021 400 3779
SPECIAL PROJECTS											
			ACTs are responsible for Coordination and Oversight of Urban Management within an identified MLRF area, with respect to: • Operations and maintenance of public buildings and infrastructure including cleaning • Safety and security and law enforcement operations • Informal trader management • Integrated community engagement processes • Coordinated transport management • Integrated waste management • Integrated water management • Integrated protection and conservation of "Community Action Plans / Area Strategies" • Area based budget coordination in terms of "Community Action Plans / Area Strategies" • Area based coordination of implementation of capital and operational projects and programmes • Area based monitoring and evaluation of performance and levels of service delivery, both qualitative and quantitative, in terms of agreed criteria and indicators ACTs set MLRF structures and are supported by the Urban Management Directorate by the respective Sub Council and are chaired by the Sub Council Chairperson. The ACTs have a steering committee and a year end review, with regular progress reports submitted to Subcouncil. ACTs meet once per month and City Representation of the departments is 10pcdr. • Cleaning • Safety and security • Low Enforcement • Spatial Planning and Urban Design • Subcouncil Management / Economic Development • Sub Council / Communities and Welfare • Community Services • Utilities • Housing • Transport Roads and Stormwater Other representatives may include the following depending on the mobility of the ACT: • Environmental Health • Property Owners and Builders • Other Government Departments • Other organs / institutions such as FASA, Golden Arrow, Taxi Industry, Informal Traders Associations, etc.	Actual as at 30 June 2019	24	6	12	18	24	7%	Contact Person: Astariff Graham Tel: 021 400 4576

Executive Director
Philemon Mashoko

2019-10-21

City Manager
Lungelo Mbandazayo

2019-10-21

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.	20%							
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.	10%							
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%							


Executive Director
Philemon Mashoko

Date

17/10/19


City Manager
Lungelo Mbandazayo

Date