

2024/2025 Executive Director Performance Scorecard: Community Services and Health Executive Director: Zukiswa Mandlana 1 July 2024 - 30 June 2025													
	No.	Objective	Key Performance Indicator	Definition	Baseline	Baseline	Annual Target	Q1 30 Sep 2024	Q2 31 Dec 2024	Q3 31 Mar 2025	Q4 30 Jun 2025	WEIGHTING	Contact Department
					2022/2023	2023/2024	2024/2025	Target	Target	Target	Target		
												100%	
	MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION											20%	
1	1	16. A Capable and Collaborative City Government	Increase in CPPPM maturity level (%) (average)	The CPPPM maturity level is based on the PPPM, Contract Management and Engineering Management (Only applicable to Engineering Directorates) maturity assessment. The maturity assessment will reflect the average maturity level of: - 1. Portfolio, Programme, Project - 2. Contract management and - 3. Engineering Management level. This will occur on an annual basis in order to assess the increase in the maturity level for the Directorate. 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 ED for Finance will be measured on a City-wide maturity level. All other EDs will be measured per the individual directorate. 1. A score of 2.89 and below based on the 2023/2024 baseline: <u>Performance rating:</u> Unacceptable performance = decrease of 0.11 and above Not fully effective = 0.0 (no movement) – decrease of 0.1 Fully effective = increase of 0.1 - 0.2 Significant performance = increase of 0.21 - 0.3 Outstanding performance = increase of 0.31 and above 2. A score of 2.9 and above based on the 2023/2024 baseline: <u>Performance rating:</u> Unacceptable performance = decrease of 0.21 and above Not fully effective = decrease of 0.1 - 0.2 Fully effective = increase of 0.0 and 0.1 Significant performance = increase of 0.11 and 0.2 Outstanding performance = increase of 0.21 and above	3.02	3.11	Actual achieved of prior year +increase 0.1 - per directorate individual achievement	AT	AT	AT	Actual achieved of prior year +increase 0.1 - per directorate individual achievement	2%	Department: CPPPM Source document: PPM assessment Contact person: Ben Peters 021 400 9206
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 contracts tenders expanded and/ or amended multiple times ÷ Total number of repeatable contract active in the FY. Measured cumulatively. <u>Performance rating:</u> Unacceptable performance = ≥ 3.1% Not fully effective= 2.6% – 3% Fully effective = 2% - 2.5% Significant performance = 0.1% - 1.99% Outstanding performance = 0%	New	2%	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. July – December 2023 - The indicator only applies to Supply Chain Management (SCM) deviations above R200 000 (inclusive of VAT). 01 January – 30 June 2024 - The indicator only applies to Supply Chain Management (SCM) deviations above R750 000 (inclusive of VAT). Sole/single service provider deviations, anti-corruption 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. Target = reduction of 20% Formula: (No. of SCM deviations for current year – No of SCM deviations for prior year)/ Number of SCM deviations for prior year X 100" Exception protocols: A default performance rating of fully effective will be awarded if you have 2 or less deviations from a base of 2 or less <u>Performance rating:</u> Unacceptable performance = Any positive increase in the number of deviations, year-on-year Not fully effective = a reduction of > 0% - < 19.9%, for the number of deviations, year-on-year. Fully effective = a reduction of 20%, for the number of deviations (year-on-year), or default criteria rating (refer exception protocol) Significant performance = a reduction > 20% - < 99.9%, for the number of deviations, year-on-year. Outstanding performance = 0 deviations	20%	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: Gayle Postings Office of the City Manager: Specialist Advisor 021 400 1268

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4	4	16. A Capable and Collaborative City Government	Reduce and maintain nominal (number and value) irregular expenditure within the Directorate (year-on-year) (average %)	The objective is to reduce past on irregular expenditure by 10% and limit 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 MFMA irregular expenditure definition and maintain lower levels of 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. Indicator will measure Irregular expenditure that was incurred (transaction) during the time of employment of the Executive Director (in the position as Executive Director). This also applies if an Existing ED moves to another portfolio. i.e. previous irregular expenditure wont impact the new Executive Director. NOTES: a) Irregular expenditure will be included, if identified by other assurance provider, irrespective if it is self-disclosed or not. b) New Executive Directors will be impacted by existing contracts that incur irregular expenditure in the term of their office. If the existing contract had irregular expenditure in the period before ED's appointment, it will not be considered for the new EDs performance. 1. New Executive Director or Executive Director taking up a post in another directorate as an Executive Director (in the year of review) Formula: Number of non-compliance incidents (irregular expenditure) for the current year, while employed as Executive Director and the amount of irregular expenditure, while employed as an Executive Director. (No baseline) This also applies if an existing ED moves to another directorate, the ED will be regarded as "New" I.e. previous irregular expenditure will not be carried over. <u>Performance rating:</u> Unacceptable performance = where more than 2 incidents exist or the total amount is more than R2.5 million, starting from a baseline of zero. Not fully effective = N/A Fully effective = 2 or less incidents and the total amount is less than R2.5 million. Significant performance = N/A Outstanding performance = 0 incidents 2. Formula: Executive Director with baseline information 1) Non-compliance incidents incurred for the current year – Non-compliance incidents incurred for prior year / Non-compliance incidents incurred for prior year x 100% Target = reduction of 10% 2) Irregular expenditure amount incurred for the current year – Irregular expenditure amount incurred for the prior year)/ Irregular expenditure amount incurred for the prior year X 100" Target = reduction of 10% <u>Performance rating:</u> Unacceptable performance = Any positive increase in incidents or amount > R2.5 million, year-on-yea+E14r Not fully effective = a reduction > 0% - < 9.9%, for incidents and amounts, year-on-year. Fully effective = a reduction of 10% or default criteria rating (refer exception protocol) Significant performance = a reduction > 10% - < 99.9%, for incidents and amount year-on-year. Outstanding performance = 0 incidents Exception protocols applicable to New Executive Directors and Executive Directors with baseline data: A default rating will apply (fully effective), if you have a zero baseline - provided that the default criteria is achieved, anything more will be unacceptable performance. A default criteria rating of fully effective will be awarded if you have 2 or less incidents and the total amount is less than R2.5 million.	New	10%	10%	AT	AT	AT	10%	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
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. The unique deadline is set in consultation with the relevant ED. Completed would mean that the actions as stipulated in the audit action plan has been executed by the relevant delegated authority. Should there be no actions required for a Directorate the indicator will not be 'Not Applicable" <u>Performance rating:</u> Unacceptable performance = N/A Not fully effective = < 99.99% Fully effective = N/A Significant performance = N/A Outstanding performance =100%	100%	100%	100%	100%	100%	100%	100%	2%	Department: Investor Relations Source document: Completed Audit Action plan Contact person: Lynn Fortune:021 400 5987
6	6	16. A Capable and Collaborative City Government	Final Council and Mayco decisions implemented within timeframes (%)	The indicator excludes all council and Mayco decisions for noting. Decisions taken by council and 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 Council and 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 achievement of councils request or expectation. Weighting must be reallocated where there were no council decisions for the year. <u>Performance rating:</u> Unacceptable performance = < 69% of ALL decisions Not fully effective = 69% - 79.99% of ALL decisions Fully effective = 80% - 85% of ALL decisions Significant performance = 85.1% - 94.99% of ALL decisions Outstanding performance = ≥ 95% of ALL decisions If "Not Applicable" weighting will be "zero" and must be reallocated within the Transversal Category.	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	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 <u>Performance rating:</u> Unacceptable performance = < 90% Not fully effective = 90% - 94.99% Fully effective = 95% - 96% Significant performance = 96.1% - 97.99% Outstanding performance = ≥ 98%	98%	90%	95%	10%	30%	60%	95%	1%	Source documents: WSP report per quarter Contact person: Grant Stephens 021 400 9851
8	8	16. A Capable and Collaborative City Government	Internal independent assurance provider's functions recommendations and action plans implemented (%)	It is the monitoring and reporting of the implementation (expressed as a percentage) of corrective actions to address internal independent assurance providers' recommendations and action plans, 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 (limited to the Corporate Risk Register), 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. Future recommendations and action plans implemented (not recommended for implementation for the current financial year), will be taken into account for the measurement of this indicator, thereby creating an advantage for the ED. Formula: Numerator: Total internal independent assurance providers' recommendations and action plans implemented (current and future implementations) Denominator: Total internal independent assurance providers' recommendations and action plans made for the current period under review (recommendations and actions plans postponed as approved by the City Manager will be excluded) <u>Performance rating:</u> Unacceptable performance = < 75% Not fully effective = 75% - 84.99% Fully effective = 85% - 90% Significant performance = 91% - 94% Outstanding performance = ≥ 95%	99%	85%	85%	85%	85%	85%	85%	1%	Department: Office of City Manager Source documents: refer to definition Contact person: Babalwa Mothibi
10	10	16. A Capable and Collaborative City Government	16.A Community satisfaction city-wide survey (average)	Measures the average 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. The aim of the indicator is to improve the community's perception of the City. 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 average score per Directorate. Refer to the 'Survey - Levels & Baselines' tab. 1. A score of 2.9 and below based on the 2023/2024 survey outcome: <u>Performance rating:</u> Unacceptable performance = decrease of ≥ 0.11 Not fully effective = 0.0 (no movement) – decrease of 0.1 Fully effective = increase of 0.1 - 0.2 Significantly performance = increase of 0.21 - 0.3 Outstanding performance = increase of ≥ 0.31 2. A score of 3 and above based on the 2023/2024 survey outcome: <u>Performance rating:</u> Unacceptable performance = decrease of ≥ 0.21 Not fully effective = decrease of 0.1 – 0.2 Fully effective = 0.0 (no movement) - increase of 0.1 Significant performance = increase of 0.11 - 0.2 Outstanding performance = increase of ≥ 0.21	2.8	2.9	Actual averaged score for 2023/2024 per ED + 0.1	A/T	A/T	A/T	Actual averaged score for 2023/2024 per ED + 0.1	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	Increase in City Pulse	The City Pulse survey measures the organisational culture and aims to improve employee experience at the City. The measure is given against a non-symmetrical Likert scale, measured biennial. The measurement for the 2024/25 will be based on the ED's lowest scoring pillar: Organisational Pillar in 2022/2023. Refer to the 'City Pulse baselines' tab. 1. A score of 3.4 and below based on the 2022/2023 baseline: <u>Performance rating:</u> Unacceptable performance = decrease of ≥ 0.2 Not fully effective = 0.0 (no movement) – decrease of 0.19 Fully effective = increase of 0.1 - 0.19 Significantly performance = increase of 0.2 - 0.29 Outstanding performance = increase of ≥ 0.3 2. A score of 3.5 and above based on the 2022/2023 baseline: <u>Performance rating:</u> Unacceptable performance = decrease of ≥ 0.2 Not fully effective = decrease of 0.1 - 0.19 Fully effective = 0.0 (no movement) - increase of 0.1 Significantly performance = increase of 0.11 - 0.2 Outstanding performance = increase of ≥ 0.2	3.4	New	3.5	A/T	AT	AT	3.5	1%	Department: Organisational Effectiveness and Innovation Source document: City Pulse 2021 Results and City Pulse 2019 results with the 3 questions identified in the attachment Contact person: Monica Pregnolato 021 400 9221

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					2022/2023	2023/2024	2024/2025	Target	Target	Target	Target		
12	12	16. A Capable and Collaborative City Government	Inclusion of C88 Output indicators (%) (average)	All Tier 1 and Tier 2 Circular 88 Output indicators should be included into the performance scorecards of the Executive Directors, where relevant. All indicators must be included verbatim into the Corporate (auditable) and Directorate SDBIP (cascading principle) and the measurement must be in compliance with the Technical Indicator Descriptions (TID) as issued by National Treasury. This indicator will be measured during the annual review process and no mid-year adjustments will be taken into account. Measurement: Q1 Weighting must be reallocated where there the ED has no Output indicators. Note: Indicators that have barriers and challenges are excluded from the formula. The indicator will measure two aspects: 1) The inclusion of C88 Output indicators in the Directorate SDBIP, and 2) The inclusion of C88 Output indicators on the Corporate Scorecard (CSC) (graduating), whether replacing existing CSC indicators. 1) Formula: Inclusion in the Directorate SDBIP - Total number of Tier 1 & 2 Output indicators included in the Directorate SDBIP divided by Tier 1 & 2 indicators required for inclusion as per C88 (auditable) * 100 2) Formula: Replacement and/ or inclusion of C88 Output indicators on the CSC - Total number of Tier 1 & 2 indicators graduated on the CSC divided by Total number of Tier 1 & 2 indicators graduated on the CSC * 100 Average: (Formula 1 + Formula 2) divided by 2 <u>Performance rating:</u> Unacceptable performance = < 80% inclusion of Tier 1&2 Not fully effective = 80% - 84.99% inclusion of Tier 1&2 Fully effective = 85% - 89.99% inclusion of Tier 1&2 Significant performance = 90% - 99% inclusion of Tier 1&2 Outstanding performance =100% inclusion of Tier 1&2	New	100%	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
13	13	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 %). <u>Performance rating:</u> Unacceptable performance = > 15% Not fully effective = > 10% - ≤ 15% Fully effective = ≤ 10% Significant performance = ≥ 5% - ≤ 9% Outstanding performance = < 5%	New	≤10%	≤10%	≤10%	≤10%	≤10%	≤10%	1%	Department: Supply Chain Management Source document: Demand Plan Overview Contact person: Bekumuzi Vumase and Razaan Arendse Manager Demand Management
14	14	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. A “gap” refers to the number of days between the expiring contract and the replacement contract commencing. 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. The indicator is based on all repeatable tenders that currently has a gap at the time of reporting, i.e. the current contract had already expired and the new contract is not yet in place. Average number of days refer to calendar days (inclusive of weekends). 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. <u>Performance rating:</u> Unacceptable performance = repeatable tenders with ≥ 150 days gap Not fully effective = repeatable tenders with ≥ 90 - < 150 days gap Fully effective = repeatable tenders with ≥ 30 - < 90 days gap Significant performance = repeatable tenders with gaps < 30 days gap Outstanding performance = zero repeatable tenders with gaps	New	0	0	0	0	0	0	2%	Department: CPPPM Source document: GAP report prepared by Zubair Contact person: Zubair Adams
	MUNICIPAL FINANCIAL VIABILITY											10%	
16	1	16. A Capable and Collaborative City Government	Total Capital Expenditure as a percentage of Total Capital Budget less contingencies (%)	This indicator measures the extent to which budgeted capital expenditure has been spent 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. Less contractual contingencies on projects and insurance contingencies. Q1 – Q3 reporting: Formula: (1) YTD Actual Capital Expenditure / (2) Total Budgeted Capital Expenditure. The latest approved budget is applicable. Q4 reporting: Formula: (1) Actual Capital Expenditure / (2) Total Budgeted Capital Expenditure less contingencies. The latest approved budget is applicable. <u>Performance rating:</u> Unacceptable performance = < 85% or >100% (non-compliance) Not fully effective = ≥ 85% - ≤ 89.99% Fully effective = 90% - 93% Significant performance = > 93% - 96% Outstanding performance = > 96%	92.1%	90%	90%	15.2%	29.4%	48.9%	90%	5%	Directorate Finance Manager

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					2022/2023	2023/2024	2024/2025	Target	Target	Target	Target		
17	2	16. A Capable and Collaborative City Government	FM1.12: Total Operating Expenditure as a percentage of Total Operating Expenditure budget	This indicator measures the extent to which operating expenditure has been spent during the financial year. Operating Expenditure (non-capital spending) is costs which the municipality incurs through its normal operations. The latest approved budget is applicable. Formula: Actual Operating Expenditure / Budgeted Operating Expenditure. The latest approved budget is applicable. <u>Performance rating:</u> Unacceptable performance = < 90.% or > 100% (non-compliance) Not fully effective = ≥ 90% - ≤ 94.99% Fully effective = 95% - 96% Significant performance = ≥ 96.1% - ≤ 97% Outstanding performance = ≥ 97.1% - 100%	95%	95%	95%	22.1%	47.4%	71.0%	95%	3%	Directorate Finance Manager
18	3	16. A Capable and Collaborative City Government	Performance on cash backed expenditure over cash back budget items only (%)	In terms of the Directive 7 of 2023, directorates cannot offset primary operating budgeted expenditure that translates into a cash outflow against non-cash flow expenditures such as Impairments, Depreciation, Debt impairment, Write-offs, Post-retirement medical aid (PRMA) provision, Rehabilitation of landfill sites, Water Inventory, labour to operating, Interest and Prior year adjustments. This indicator measures the outcome of cash backed items only over the budget and if the outcome is higher than 100% then, it reflects reliance on non-cash items. The aim of the indicator is to achieve an outcome of less than or equal to 100%. Source: Financial information. Formula: Operating expenditure (cash items only) / Operating budget (cash items only). Measured quarterly. <u>Performance rating:</u> Unacceptable performance = >100% Not fully effective = N/A Fully effective = ≤ 100% Significantly performance = N/A Outstanding performance = N/A	New	0%	≤100%	≤100%	≤100%	≤100%	≤100%	2%	Directorate Finance Manager
	SERVICE DELIVERY/GOOD GOVERNANCE											60%	
19	1	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 (%)	Measures the implementation of the Recreation and Parks Department's public open space mowing activities during the year compared to what was planned on the mowing schedule . The minimum mowing cycle targets, and ability to meet these targets, are directly linked to the budget available for the project. The measurement is the frequency of actual mowing versus what was planned on the mowing schedule, measured as a percentage. Actual implementation to be compared to what was planned, using minimum mowing standards as articulated in the Department's documented "Standards per facility type." <u>Performance rating:</u> Unacceptable performance = < 80% Not fully effective = 80% - 83.99% Fully effective = 84 - 90% Significant performance = 90.1% - 95% Outstanding performance = > 95%	100.5%	82%	84%	A/T	A/T	A/T	84%	6%	Director: Recreation & Parks
20	2	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 <u>Performance rating:</u> Unacceptable performance = >4.4% Not fully effective = 4.4 - 3.9% Fully effective = 3.9 - 3.85% Significant performance = 3.84 — 3.75% Outstanding performance = <3.75%	2.4%	<4%	<3.9%	A/T	A/T	A/T	<3.9%	6%	Director: City Health
21	3	11. Quality and safe parks and recreation facilities supported by community partnerships C88	Average number of Library visits per library	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. <u>Performance rating:</u> Unacceptable performance = <61 000 Not fully effective = 61 000 - 62 999 Fully effective = 63 000 - 65 000 Significant performance = 65 001 - 67 000 Outstanding performance = > 67 000	62793	63000	63000	A/T	A/T	A/T	63000	6%	Director: LIS
22	4	11. Quality and safe parks and recreation facilities supported by community partnerships C88	Reading programmes held (number)	A reading programme is defined as a programme that must consist of a minimum of 5 sessions i.e. a minimum of 1 session per week within a 3 month period with the same audience (majority of audience) as well as 1-on-1 sessions and via online platforms and at the end it is counted as 1 programme. A reading programme also includes reading lists i.e. reading a defined number of books over a specified period (e.g. holiday period). A reading programme must consist of some measure of interaction between library staff and the public. Integrated reading programmes consist of a minimum if 1 library working with another department in implementing a programme, or 2 or more libraries implementing a programme. Reading programmes target young learners (primary school learners - aged 7 to 13 and youth - aged 14 to 18) and aim to improve their reading skills as well as to develop and inculcate a culture of reading. Reading programmes are counted at the conclusion of the programme and not per session. <u>Performance rating:</u> Unacceptable performance = <521 Not fully effective =521 - 530 Fully effective = 531-540 Significant performance = 541 - 550 Outstanding performance = >550	New	New	531	148	259	397	531	6%	Director: LIS

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23	5	15. A more spatially integrated and inclusive city	ECD Centres assisted towards compliance (number)	Eligible ECD is one referred by the DSD appointed SSO's to the SDECD Area Offices to process City compliance requirements. The indictor measures the number 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. When an ECD is captured on the tool, it is a "1". <u>Performance rating:</u> Unacceptable performance =<231 Not fully effective = 231 - 239 Fully effective = 240 - 245 Significant performance = 246 - 255 Outstanding performance = >255	New	New	240	60	120	180	240	6%	Director: SD&ECD
24	6	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. <u>Performance rating:</u> Unacceptable performance = <1100 Not fully effective = 1100 - 1149 Fully effective = 1 150- 1 199 Significant performance = 1 200 - 1 299 Outstanding performance = > 1 299	New	1150	1150	288	576	864	1150	6%	Director: City Health
25	7	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. <u>Performance rating:</u> Unacceptable performance = >56 Not fully effective = 51 - 56 Fully effective = 48 - 50 Significant performance = 45 - 47 Outstanding performance = <45	New	≤ 68	≤ 50	≤ 13	≤ 26	≤ 39	≤ 50	6%	Director: City Health
26	8	11. Quality and safe parks and recreation facilities supported by community partnerships	Recreation and Parks initiatives implemented for informal settlements (number)	Definition of Programme, Projects and Initiatives - as follows: Programme = the high level focus creating the focus and context for several projects; Projects = a specific component of a broader programme and can comprise of several initiatives; Initiatives = a focused activity or set of activities aligned to a project or programme which can be delivered repetitively for at least 4 weeks. For the purpose of this indicator the project is defined as Informal Settlements Project. Evidence: Project Reports on actual initiatives implemented - to include dates, photographs and the numbers of people participating or in attendance. <u>Performance rating:</u> Unacceptable performance = <30 Not fully effective = 30 - 31 Fully effective = 32 - 33 Significant performance = 34 - 35 Outstanding performance = >35	New	New	32	8	16	24	32	6%	Director: Recreation & Parks
27	9	11. Quality and safe parks and recreation facilities supported by community partnerships	R&P Facilities inspected quarterly (%)	This indicator is intended to support the realisation of improving the Recreation and Parks Department's (R&P) service mandate in terms of Facility Management by ensuring that R&P facilities are inspected on a regular basis, using a frequency of inspections standard. The inspections will be deemed as basic visual assessments with regards to the overall condition of the facility and immediate surrounds. Each visit to be recorded in terms of the date of the visit and completion of a generic checklist. The measurement is anticipated to always account for 90% of the inspection rate represented by the total number of facilities as established at the beginning of the financial year. Timeline adherence: A facility will be inspected internally monthly, but official reporting will be quarterly. Count: The sum of all facilities inspected within the reporting timeline (1 facility equals 1 count). The following facilities are included in the measurement (but are not limited to): Civic Centres, Community Halls; Swimming Pools; Sportsgrounds; Community Parks, District Parks and Cemeteries. A single system to be applied within the Department in line with operational accountabilities and authorities in terms of conducting of inspections, as well as reviewing and endorsement of results. Non-Cumulative Target. <u>Performance rating:</u> Unacceptable performance = <88% Not fully effective = 88 - 89% Fully effective = 90 - 91% Significant performance = 91.1 - 95% Outstanding performance = >95%	New	New	90%	90%	90%	90%	90%	6%	Director: Recreation & Parks
28	10	15. A more spatially integrated and inclusive city	Public 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 = <90 Not fully effective = 90 - 95 Fully effective = 96 - 100 Significant performance = 101 - 105 Outstanding performance = >105	105	90	96	24	48	72	96	6%	Director: SD&ECD

	No.	Objective	Key Performance Indicator	Definition	Baseline	Baseline	Annual Target	Q1 30 Sep 2024	Q2 31 Dec 2024	Q3 31 Mar 2025	Q4 30 Jun 2025	WEIGHTING	Contact Department
					2022/2023	2023/2024	2024/2025	Target	Target	Target	Target		
	DIRECTORATE SPECIFIC PROJECTS											10%	
29	1	16. A Capable and Collaborative City Government	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 for operational purposes. The approved list must include the following: • Property occupancy – Staff member occupying property by conducting a site visit. • Operational need - staff member and staff number confirmed on SAP. • Lease agreement in place (number and tenure). • Rental value. • Fringe benefit registration, confirmed with Payroll. Closed out status- where all the above conditions are met. Formula: Numerator: All staff housing verified (with a closed out status) Denominator: All staff housing <u>Performance rating:</u> Unacceptable performance = <50% Not fully effective = 50 - 89% Fully effective = 100% Significant performance = N/A Outstanding =N/A	51%	100%	100%	60%	75%	90%	100%	2%	Director: Recreation & Parks
30	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 application 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 administrative information has been supplied, 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. <u>Performance rating:</u> Unacceptable performance = >135 Not fully effective = ≤135 - >130 Fully effective: 130 -125 Significantly performance = ≥115 - <125 of all targets achieved Outstanding performance = < 115	126.99	140	130	130	130	130	130	2%	Director: City Health
31	3	15. A more spatially integrated and inclusive city	Interventions implemented with people living on the street aimed at reintegration (number)	To reduce and manage the number of people living and/or working on the streets through holistic, developmental, integrated and realistic programmatic interventions and social support. Through, but not limited to, planned Group work/support groups focusing on specifically identified developmental programmes e.g. substance abuse, family strengthening, lifestyle and Hygiene. NB: Each planned intervention will be counted as 1. <u>Performance rating:</u> Unacceptable performance = < 36 Not fully effective = 36 - 39 Fully effective = 40 - 41 Significant performance = 42 - 44 Outstanding performance = > 44	New	New	40	10	20	30	40	2%	Director: SD&ECD
32	4	2. Improved access to quality and reliable basic services	Less Formal Township Establishment Act (LFTEA): Health hazards identified 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) <u>Performance rating:</u> Unacceptable performance = < 93% Not fully effective = 93 - 97.99% Fully effective = 98% - 98.5% Significant performance = 98.6 - 99% Outstanding performance = > 99%	100%	98%	98%	98%	98%	98%	98%	2%	Director: City Health
33	5	16. A Capable and Collaborative City Government	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" submitted that meet the Legal requirements. Legal Services to provide a confirmation that the matter is complete and can be lodged. <u>Performance rating:</u> Unacceptable performance = < 10 Not fully effective = 10-11 Fully effective = 12-13 Significant performance = 14-15 Outstanding performance = >15	21	12	12	3	6	9	12	2%	Director: Recreation & Parks

Zukiswa Mandlana

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Zukiswa Mandlana
Date: 2024.07.24
07:14:36 +02'00'

Executive Director:
Community Services & Health
Zukiswa Mandlana

Date

Digitally signed by Lungelo
Mbandazayo
Date: 2024.07.30 18:22:02 +02'00'

City Manager:
Lungelo Mbandazayo

Date