

PERFORMANCE AGREEMENT

Made and entered into by and between

THE CITY OF JOHANNESBURG METROPOLITAN MUNICIPALITY

("the City")

(Represented by **Floyd Brink, the City Manager**, duly authorised by Municipal Council Resolution)

and

Thanduxolo Mendrew

("the Group Head")

for the financial year: 1 July 2023 to 30 June 2024

1. INTRODUCTION

- 1.1 The City has entered into a contract of employment with the Group Head in terms of Section 57(1)(a) of the Local Government: Municipal Systems Act 32 of 2000 ("the Systems Act").
- 1.2 Section 57(1)(b) of the Systems Act, read with the contract of employment concluded between the parties, requires the parties to conclude an annual performance agreement.
- 1.3 The parties wish to ensure that they are clear about the goals to be achieved and secure the commitment of the Group Head reporting to the City Manager, to a set of actions that will secure local government policy goals.

2. PURPOSE OF THIS AGREEMENT

- 2.1 The parties agree that the purpose of this Agreement is to:
 - 2.1.1 comply with the provisions of Section 57(1)(b), 4(A), (4B) and (5) of the Systems act; and the employment contract entered into between the parties.
 - 2.1.2 specify objectives and targets established for the Group Head.
 - 2.1.3 specify accountabilities as set out in the performance plan (scorecard) attached as Annexure 'A'.
 - 2.1.4 monitor and measure performance against set targeted outputs.
 - 2.1.5 use the performance agreement and scorecard as the basis for assessing whether the employee has met the performance expectations applicable to their job.
 - 2.1.6 In the event of outstanding performance, to appropriately reward the employee in accordance with the City's performance management policy; and
 - 2.1.7 give effect to the City's commitment to a performance-orientated relationship with the Group Head in attaining equitable and improved service delivery.

3. COMMENCEMENT AND DURATION

- 3.1 Notwithstanding the date of signature hereof, this Agreement will commence on the date of appointment of the Group Head, and, subject to paragraph 3.3, will continue in force until a new performance agreement is concluded between the parties as contemplated in paragraph 3.2.

- 3.2 The parties will review the provisions of this Agreement during June each year. The parties will conclude a new performance agreement that replaces this Agreement at least once a year by not later than July each year.
- 3.3 This Agreement, with the current City Manager, may terminate on the termination of the City Manager's appointment regardless of the reason for such termination and a new performance agreement may be entered into with a new City Manager.
- 3.4 The content of this agreement may be revised at any time during the abovementioned period to determine the applicability of the matters agreed upon.
- 3.5 If at any time during the validity of this agreement the work environment alters (whether because of government or council decisions or otherwise) to the extent that the contents of this agreement are no longer appropriate, the contents shall be revised.

4. PERFORMANCE OBJECTIVES

- 4.1 The scorecard in Annexure "A" sets out:
- 4.1.1 the performance objectives and targets that must be met by the Group Head; and
- 4.1.2 the time frames within which those performance objectives and targets must be met.
- 4.2 The performance objectives and targets reflected in Annexure "A" (scorecard) are set by the City Manager and the Group Performance Audit Committee after consultation with the Group Head and are based on the Integrated Development Plan, Mayoral Priorities Service Delivery and Budget Implementation Plan (SDBIP) and Budget of the City, and include key objectives; key performance indicators; target dates and weightings.
- 4.3 The key objectives describe the main tasks that need to be done. The key performance indicators provide the details of the evidence that must be provided to show that a key objective has been achieved. The target dates describe the timeframe in which the work must be achieved. The weightings show the relative importance of the key objectives to each other.
- 4.4 The Group Head's performance will, in addition, be measured in terms of contributions to the goals and strategies set out in the City's Integrated Development Plan.

5. PERFORMANCE MANAGEMENT POLICY

- 5.1 The Parties record that the City has a Performance Management Policy, which may be amended from time to time. It describes the systems and procedures of performance management in the City in which the Group Head will be required to engage in performing their job.
- 5.2 The Group Head agrees to participate in the performance management system that the City adopts or introduces.
- 5.3 The Group Head accepts that the purpose of the performance management policy and system is to provide a comprehensive system with specific performance standards to assist the City, City Manager and Group Head to perform to the standards required.
- 5.4 The Group Head undertakes to actively focus towards the promotion and implementation of the Key Performance Areas (KPA's) (including special projects relevant to the employee's responsibilities) within the local government framework.
- 5.5 The Group Head's assessment will be based on their performance in terms of the outputs/outcomes (performance indicators) identified as per the performance plan which are linked to the KPA's.

6. EVALUATING PERFORMANCE

- 6.1 It is recorded that in terms of the City's performance management policy and system, for purposes of evaluation of the performance of the Group Head, a Group Performance Audit Committee and Performance Evaluation Panel have been established to assist the City Manager and in the process of evaluating the Performance of the Group Head.
- 6.2 The performance of the Group Head in relation to their performance agreement shall be reviewed on a quarterly basis as follows:

First quarter	:	July – September
Second quarter	:	October – December
Third quarter	:	January – March
Fourth quarter	:	April – June

- 6.3 The Group Head must avail themselves for scheduled performance reviews. Failure to do so, may result in the City Manager concluding on Group Head's review in absentia and the outcome of the review is final.

- 6.4 The City Manager shall ensure that the Group Performance Audit Committee be convened to conduct review sessions on the performance of the Group Head at least twice a year.
- 6.5 The City Manager shall ensure that a record is kept of the mid-year review and final review sessions.
- 6.6 Performance feedback shall be based on the assessment of the Group Head's performance by the City Manager and Group Performance Audit Committee, as well as the Performance Evaluation Panel and may include recommendations for corrective steps to be taken to improve performance.
- 6.7 The City will be entitled to review and make reasonable changes to the provisions of the performance plan (scorecard) from time to time for operational reasons. The Group Head will be consulted before any such change is made.
- 6.8 Despite the establishment of agreed intervals for evaluation, the City Manager may, in addition, review the Group Head performance at any stage while the contract of employment remains in force.
- 6.9 Personal growth and development needs identified during any performance review discussion must be documented and, where possible, actions agreed.
- 6.10 The annual performance appraisal will involve assessment of the achievement of results as outlined in the performance plan and each KPA and CCR should be assessed according to the extent to which the specified standards or performance indicators have been met.

7. OBLIGATIONS OF EMPLOYER

The City must -

- 7.1 Create an enabling environment to facilitate effective performance by the employee;
- 7.2 Provide access to skills development and capacity building opportunities;
- 7.3 Work collaboratively with the Group Head to solve problems and generate solutions to common problems that may impact on the performance of the employee;
- 7.4 On the request of the Group Head delegate such powers reasonably required by the Group Head to enable them to meet the performance objectives and targets established in terms of the agreement; and
- 7.5 Make available to the Group Head such resources as the Group Head may reasonably require from time to time to assist them to meet the performance objectives and targets established in terms of the agreement.

8. CONSULTATION

The City Manager agrees to consult the Group Head timeously in respect of decisions which will have a significant impact on the performance of the duties of the Group Head.

9. MANAGEMENT OF OUTCOMES

- 9.1 The evaluation of the Group Head's performance will form the basis for rewarding performance or correcting unacceptable performance.
- 9.2 A performance bonus not exceeding 14% may be paid to the Group Head in recognition of outstanding performance, in accordance with the City's policy and system referred to in this agreement.
- 9.3 An increase may be awarded to the Group Head in accordance with the City's policy and system referred to in this agreement.
- 9.4 Should the Group Head be entitled to a performance bonus referred to in paragraph 9.2, this will be paid out after the tabling of the annual report.
- 9.4.1 However, should the Acting Executive Director not be entitled to a performance bonus in line with Group Head's employment contract, alternative performance rewards will be awarded as per the relevant policy.
- 9.5 In the case of unacceptable performance, the City Manager shall provide systematic remedial or developmental support to assist the Group Head to improve their performance.
- 9.6 Where the City Manager is, at any time during the Group Head's employment, not satisfied with the Group Head's performance with respect to any matter dealt with in this Agreement, the City Manager will give notice to the Group Head to attend a meeting with the City Manager.
- 9.7 The Group Head will have the opportunity at the meeting to satisfy the City Manager of the measures being taken to ensure that the Group Head's performance becomes satisfactory and any programme, including any dates, for implementing these measures.
- 9.8 Where there is a dispute or difference as to the performance of the Group Head under this Agreement, the parties will confer with a view to resolving the dispute or difference.

10. DISPUTES

- 10.1 Any dispute arising out of this Agreement, shall be submitted to and determined by arbitration in accordance with the arbitration rules of an accredited private dispute resolution agency, as amended. The arbitrator shall be mutually agreed upon, and shall be selected from a list of arbitrators supplied by an accredited private dispute resolution agency.
- 10.2 The parties shall, prior to the arbitration date, be required to meet with the arbitrator in order to determine the appropriate terms of reference for the arbitrator, and their powers, and to submit an agreement in writing to the arbitrator.
- 10.3 Should the parties fail to agree on the identity of the arbitrator within a period of 14 days after the date of the submission of the dispute to the City Manager, either of the parties shall be entitled to request a private dispute resolution agency, to appoint the arbitrator. The accredited private dispute resolution agency, in making the appointment, shall have regard to the nature of the dispute, and shall have regard to the parties' requirement of speedy arbitration in the selection of arbitrators. If the appointment is to be made in this manner, preference shall be given to the attorneys or advocates on the Panel of arbitrators of the accredited private dispute resolution agency.
- 10.4 The arbitrator shall be entitled further to determine the procedure to be followed in the arbitration, but to ensure that each party has the right to be heard, lead appropriate witnesses, submit documentation, and to argue in respect of the appropriate outcome and remedy. The arbitrator shall, in determining the procedures to be followed, be guided by the parties' intention to have the dispute finally adjudicated upon within as short as possible a period from the date of the dismissal, or of the dispute, arising.
- 10.5 The parties shall be entitled to be represented by a representative of choice at the arbitration, and the outcome of the arbitration shall be final and binding. The Group Head shall be bound to the dispute resolution procedures contained herein.
- 10.6 The fact that any dispute has been referred to, or is the subject of an arbitration, as well as any information submitted or furnished to the arbitrator, or in any other matter forming part of the record of any arbitration proceeding, shall be kept confidential by the parties to such proceeding.


11. GENERAL

- 11.1 The contents of the Agreement and the outcome of any review conducted in terms of Annexure "A" (scorecard) will not be confidential and may be made available to the public by the City, where appropriate.

11.2 Nothing in this Agreement diminishes the obligations, duties or accountabilities of the Group Head in terms of their contract or employment, or the effects of existing or new regulations, circulars, policies, directives or other instruments.

SIGNED at Braamfontein on this the 19th day of July 2023

For: THE CITY OF JOHANNESBURG
METROPOLITAN MUNICIPALITY




City Manager

Witness: _____

Witness: _____

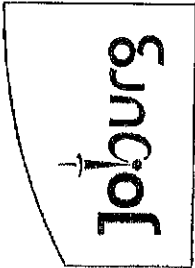
SIGNED at Braamfontein on this the 19th day of July 2023



Thanduxolo Mendrew
Group Head

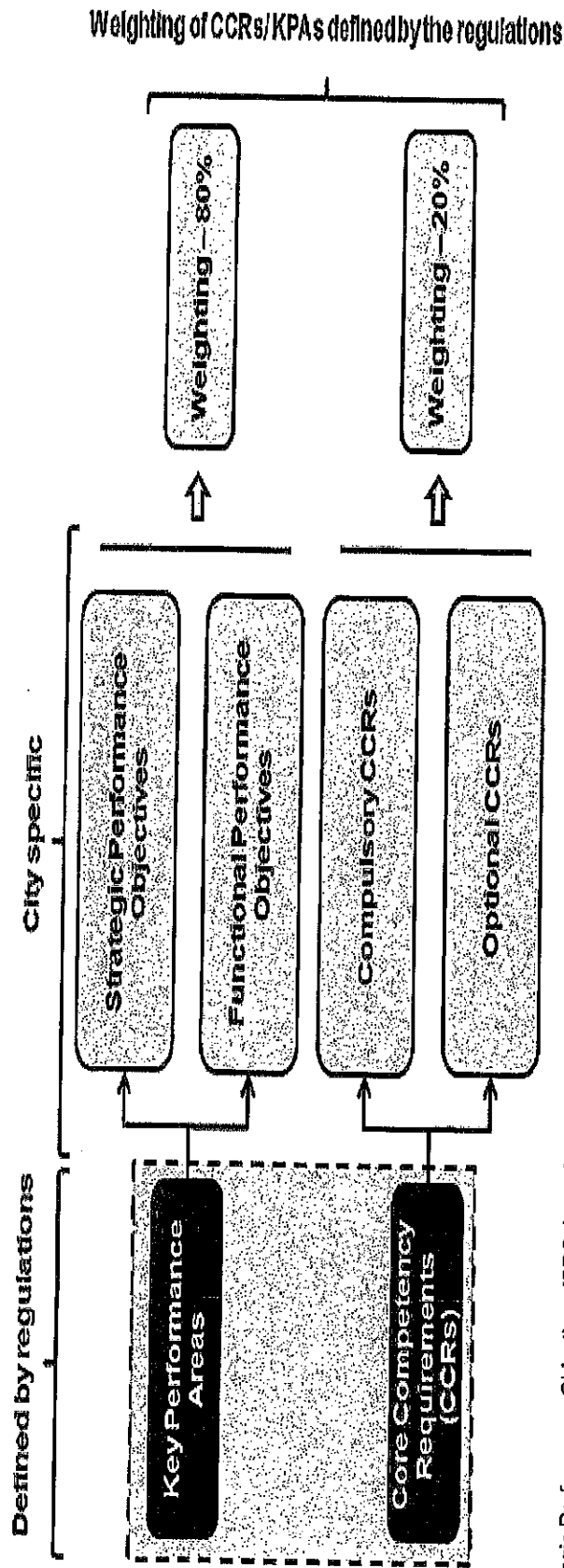
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PERFORMANCE SCORECARD SECTION 57	
Employee	Thanduxolo Mendrew: Group Head
Manager	Floyd Brink: City Manager
Department	Group Citizen Relations and Urban Management
Position Purpose	To deliver a sustainable and impact driven regional governance for a well-managed, well serviced, and safe urban environment through facilitation and coordination of integrated, sustainable and resilient basic service delivery, Citizen Relationship and Urban Management
The period of this Performance Plan is from 1 July 2023 to 30 June 2024	

The individual performance scorecards shall be made up of Key Performance Areas (KPA) (divided into Functional Performance Objectives (FPO) and Strategic Performance Objectives (SPO)) and Core Competency Requirements (CCR) which shall have a relative weighting of 50% to 30% to 20% respectively. Therefore, the scorecard is separated into three sections, namely, Functional Performance Objectives, Strategic Performance Objectives and Core Competency Requirements.



Strategic Performance Objectives (SPOs) are those KPAs which are derived from key citywide and cluster-based objectives and strategies. Of the total 80% KPA weighting, the relative weighting for SPOs should not be less than 50%. The SPOs are developed to reflect the City's strategic priorities within the individual employee scorecard. Functional Performance Objectives (FPOs) relate to the employee's functional areas, objectives and responsibilities. Of the total 80% KPA weighting, the relative weighting for FPOs should not exceed 30%.

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KPA	Key Performance Areas (KPAs)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
1	Sustainable Service Delivery	1.1	% Improvement in service delivery in CoJ regions ¹	New Indicator	1=5% 2=10% 3=20% 4=30% 5=Consolidated Remedial Plan	<ul style="list-style-type: none"> Quarterly State of the Region Reports Consolidated Remedial Plan
		1.2	Development of service delivery maturity assessment report (as-is and to-be) ²	New Indicator	1= Service delivery assessment plan 2=Inception report 3=Final draft service delivery maturity assessment report 4=Final assessment report noted by EMT, Technical Clusters 5= 2024/25 Service Delivery Improvement Plan	<ul style="list-style-type: none"> Assessment Plan Signed-off by GH: CRUM Final Assessment Report Minutes of EMT and Technical Clusters
		1.3	% Implementation of the Area Based Management Strategy (ABM) 2023	100%	1=<25% Implementation 2=25% Implementation 3=90% Implementation 4=>90% Implementation 5=2024/25 ABM Implementation Plan	<ul style="list-style-type: none"> Signed-off by GH: CRUM Consolidated implementation plan 2023/23 Minutes of EMT and Technical Clusters
		1.4	%Implementation of the Citizen Relationship Strategy (CRM) 2023	12 per region.	1=<25% Implementation 2=25% Implementation 3=90% Implementation 4=>90% Implementation 5=2024/25 CRM Implementation Plan	<ul style="list-style-type: none"> Minutes of EMT and, Technical Clusters CRM Strategy Signed-off by GH: CRUM Consolidated implementation plan 2023/24
STRATEGIC PERFORMANCE OBJECTIVES TOTAL WEIGHTING = 50%						

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¹ Improvement to be measured on the resolvency rate/percentages per entity/department indicated in the State of the Region Report. Each entity to be measured separate on quarterly basis.

² Focus of the assessment will be on expenditure of Capex and Opex by service delivery agencies across CoJ regions

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KPA	Key Performance Areas (KPAs)	KPI No	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
2	Safer and Smart City	2.1	% Development of knowledge and information repository ³	12 per region.	1=50% Development 2=75% Development 3=100% Development 4=2 Training sessions 5=3 Training sessions	Dashboard/Share Point Repository
3	Sustainable Service Delivery	3.1	% Implementation of Ward Operational Plans	New Indicator	1=50% Implementation 2=75% Implementation 3= 100% Implementation 4=Remedial Plan developed 5=50% Implementation of the Remedial Plan	<ul style="list-style-type: none"> • Ward Operational Plans • Minutes of EMT and Technical Cluster • Remedial Plan Implementation Report Signed Off by the GH
		3.2	% Implementation of the newly developed CRUM-led Service Level Agreements	New indicator	1=50% Implementation 2=75% Implementation 3= 100% Implementation 4=Remedial Plan developed 5=50% Implementation of the Remedial Plan	<ul style="list-style-type: none"> • Approved Service Level Agreements • Minutes of EMT and Technical Clusters • Remedial Plan Implementation Report Signed Off by the GH
		3.3	% Implementation of AFS operational model	New Indicator	1=Approved AFS Model 2=3 x Quarterly implementation reports 3= 4 x Quarterly implementation reports 4=Annual Implementation Report 5=Approved Action Plan for 2024/25 implementation	<ul style="list-style-type: none"> • Approved AFSU Model • Consolidated Implementation Report Signed Off by GH
		3.4	Monitoring of capex projects implemented by service delivery agencies	New indicator	1=Approved MTEF Project List 2 = Approved Monitoring Plan 3=4 x Quarterly Monitoring Reports 4= Annual Monitoring Report with recommendations and proposed interventions 5= Tracking Sheet of Recommendations and their status	<ul style="list-style-type: none"> • Approved MTEF Project List • Approved Monitoring Plan • Consolidated Monitoring Report • Annual Monitoring Report Signed Off by the GH • Tracking Sheet

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³Repository to be developed with the assistance of the Innovation and Knowledge Management Unit in GSPCR based on the Knowledge Management Strategy. The data generated will be stored on CRUMDIS or the upgraded version thereof.

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KPA	Key Performance Areas (KPAs)	Key Performance Indicators (KPIs)	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
		3.5	% Monitoring of Service Delivery Profile aligned to Capex and Opex Expenditure	New Indicator	1= 70% Service Delivery Profile developed and monitored 2=90% Service Delivery Profile developed and monitored 3=100% Service Delivery Profile developed and monitored 4=Up to 50% of projects completed 5>50% of the projects completed	<ul style="list-style-type: none"> Database of projects per region Quarterly Implementation Reports per region
4	Accountability and Governance	4.1	% Implementation of the ombudsman's recommendations ⁴	No recommendations received	1 = less than 50% implemented within 90 days or more days 2 = 50% - 84% implemented within 90 days or more days 3 = 85% - 100% implemented within 90 days 4 = 100% implemented within 60 days 5 = 100% implemented within 30 days or less days	Quarterly dashboard of the Ombudsman's recommended cases implemented signed-off by the Ombudsman
		4.2	Percentage of agreed recommendations implemented ⁵ by department emanating from concluded forensic investigation within 90 days	New indicator	1 = less than 50% implemented within 90 days or more days 2 = 50% - 84% implemented within 90 days or more days 3 = 85% - 100% implemented within 90 days 4 = 100% implemented within 60 days 5 = 100% implemented within 30 days or less days	<ul style="list-style-type: none"> GFIS Dashboard of concluded investigations Copy of concluded investigation report Acknowledgment of receipt by clients Implementation plan by clients. Implementation/status report signed off by HOD/CEO. Quarterly monitoring report signed off by signed-off by the Head of

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⁴ Department/Entity/ Employee must provide the Office of the Ombudsman with a written confirmation within 14 days of receiving the recommended corrective action stating if the recommended corrective action will be implemented or not. In the event that the recommendation will not be implemented a compressive report must be written to the Ombudsman stating why the recommended corrective action will not be implemented. The recommendations (Findings related to CRUM's activities only) may include but not limited to negotiations, conciliation or mediation, apology, action that may result in disciplinary measures and any other justified way to obtain a settlement.

⁵ Any person who fails to comply with any lawful instruction issued by the Office of the Ombudsman shall be found guilty of an offence and liable for a fine or imprisonment. Findings and recommendations related to CRUM's activities only

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KPA	Key Performance Areas (KPA's)	KPI No.	Key Performance Indicators (KPI's)	Baseline	Target	Means of Verification
5	A well-run City					GFIS
		4.3	Turnaround times to respond to oversight & advisory committees' requests ⁶ GPAC MPAC GAC S79 Committees	New Indicator	1 = 2 days after the approved timelines 2 = 1 day after the approved timelines 3 = Within the approved timelines 4 = 1 day ahead of approved timelines 5 = 2 days ahead of approved timelines	<ul style="list-style-type: none"> Departmental quarterly tracking reports signed by HoD; POCM analysis dashboard tabled at EMT
		5.1	Audit Outcome ⁷		1= Adverse Audit report ⁸ 2= Qualified Audit Report ⁹ 3= Unqualified without material finding 4= Unqualified report with audit findings classified as other matters and administrative matters 5= Unqualified audit report with no findings (clean audit)	<ul style="list-style-type: none"> AG Audit Report Management Letter
		5.2	% Resolution of internal audit findings ¹⁰	100%	1 ≤ 85% resolution 2 = 86% - 90% resolution 3 = 91% - 95% resolution 4 = 96% - 97% resolution 5 = 98% - 100% resolution (including no findings)	<ul style="list-style-type: none"> GAC Internal Audit Report on Findings Minutes

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⁶ Responses to focus on requests related to CRUM's scope of work

⁷ The opinion may be that given for the department/entity where applicable.

⁸ This is where AGSA is unable to and does not express an audit opinion due to uncertainty.

⁹ This is where there is a disagreement between AGSA and COU on fair presentation & disclosure.

¹⁰ These are findings by internal audit only that are picked up on an ongoing basis.

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KPA	Key Performance Areas (KPAs)	KPI No	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
		5.3	% Resolution of external (AGSA) audit findings ¹¹	100%	1 ≤ 85% resolution 2 = 86% - 90% resolution 3 = 91% - 95% resolution 4 = 96% - 97% resolution 5 = 98% - 100% resolution (including no findings)	<ul style="list-style-type: none"> GAC Internal Audit Report on Findings Minutes
		5.4	% Compliance with response timelines for the submission of the Annual Performance Report ¹²	New indicator	1 = 85% compliance 2 = 90% compliance 3 = 100% compliance 4 = 100% compliance 2 days earlier 5 = 100% compliance 3 days earlier	GSPCR tracking report signed-off by M&E Unit Head
SECTION 2: FUNCTIONAL PERFORMANCE OBJECTIVES						
1	Procurement and Contract Management	1.1	Percentage management of contracted supplier contract within the department ¹³	100%	1 = contract expired without starting new procurement process 2 = Contract expired while procuring 3 = 90% management of all contracts without incurring and deviations 4 = 95% management of all contracts without incurring and deviations 5 = 100% management of all contracts without incurring and deviations ¹⁴	<ul style="list-style-type: none"> Status of the Contracts Register Sign-off by the OGCFO
		1.2	% Compliance to acquisition of goods and services as per the approved demand plan	100%	1 = Acquisition plan 2 = Procurement delayed 3 = 100% compliance 4 = Target met within 15 days ahead of delivery date 5 = Target met within 1 month ahead of delivery date	<ul style="list-style-type: none"> Approved Acquisition plan Departmental Quarterly Acquisition Status Reports SCM Assessment reports

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¹¹ These are AGSA findings from departmental/entity annual reports, as well as the main CoJ annual report.

¹² Relates to response in terms of supply of full performance information as required by GSPCR for the development of the CoJ Integrated Annual Report

¹³ Each department is responsible for ensuring that they have internal processes to monitor the lifespan of their supplier contracts. Contracts must always be in force for as long as the projects are ongoing to avoid Irregular Expenditure. The HoD must engage and respond to the GCFO in terms of updating the contracts register.

¹⁴ New contract secured/ appointed (not through deviation or regulation 32 or 36) within a month or two of expiry of old contract.

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KPA	Key Performance Areas (KPAs)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
	UJFW Strategy Implementation	2.1	Percentage reduction in historical Unauthorised expenditure reported 30 June 2023		1=<80% 2=81-84% 3=85-95% 4=96-99% 5=100%	GIAS consolidated quarterly assessment report
		2.2	Percentage reduction in current and/or new Unauthorised expenditure		1=<80% 2=81-84% 3=85-95% 4=96-99% 5=100%	GIAS consolidated quarterly assessment report
		2.3	Percentage reduction in historical Irregular expenditure reported 30 June 2023		1=<80% 2=81-84% 3=85-89% 4=90-94% 5=95% and above	GIAS consolidated quarterly assessment report
		2.4	Percentage reduction in current and/or new Irregular expenditure		1=<80% 2=81-84% 3=85-95% 4=96-99% 5=100%	GIAS consolidated quarterly assessment report
		2.5	Percentage reduction in historical Fruitless and Wasteful expenditure reported 30 June 2023		1=<80% 2=81-84% 3=85-89% 4=90-94% 5=95% and above	GIAS consolidated quarterly assessment report
		2.6	Percentage reduction in current and/or new Fruitless and Wasteful expenditure		1=<80% 2=81-99% 3=85-95% 4=96-99% 5=100%	GIAS consolidated quarterly assessment report
3	Risk Management	3.1	% of risks mitigation strategies action plan for departmental top strategic risks implemented towards the reduction of departmental risks	75%	1 < 50% implemented 2 = 51% - 84% implemented 3 = 85% implemented 4 = 95% of departmental top strategic risks implemented 5 = 100% of departmental top strategic risks implemented	GRGC Risk analysis reports and Minutes

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KPA	Key Performance Areas (KPAs)	KPI No	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
4	Departmental performance management, monitoring and reporting	4.1	% Of departmental escalated matters resolved	New Indicator	1 < 75% resolved 2 = 75% - 84% resolved 3 = 85% - 89% resolved 4 = 90% - 99% resolved 5 = 100% resolved	Mitigation plans reflecting the status of resolution signed by the HoD approved by the CM
5	Policies	5.1	% Management's of policies in the department	New Indicator	1 < 65% (some policies expired/not implemented) 2 = 65% (some policies reviewed after 1 month of expiry) 3 = 100% (all policies implemented/valid/merged/reviewed within 1 month before expiry) 4 = 130% (all policies implemented/valid/merged/reviewed within 15 days before expiry) 5 = 150% (all policies implemented/valid/merged)	<ul style="list-style-type: none"> Database of all policies and their status Progress reports
6	mSCOA reporting	6.1	% Compliance with mSCOA reporting timelines	15% compliance	1 < 80% Compliance with mSCOA data quality for NT strings submission 2 = 80% Compliance with mSCOA data quality for NT strings submission 3 = 85% Compliance with mSCOA data quality for NT strings submission 4 = 90% Compliance with mSCOA data quality for NT strings submission 5 = 100% Compliance with mSCOA data quality for NT strings submission	Quarterly mSCOA compliance reports

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¹⁵ Management entails implementation, timeous reviews and merging and / or discarding redundant policies where applicable.

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KPA	Key Performance Areas (KPAs)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
SECTION 3: CORE MANAGERIAL COMPETENCIES (TOTAL WEIGHTING = 20%)						
Financial Competence (Compulsory)						
1	Expenditure Management	1.1	% Spent of allocated departmental Opex budget	100%	1 ≤ 90% Opex spent. 2 = 91% - 94.9% Opex spent 3 = 95% Opex spent 4 = 99% Opex spent... 5 = 100% Opex spent.	<ul style="list-style-type: none"> SAP Report Opex report by Group Finance Sign off by EH: POCM
		1.2	Percentage of valid departmental invoices paid within 30 days of submission to Group Finance for payment ¹⁶	100%	1 = 90% of valid invoices paid within 30 days 2 = 92% of valid invoices paid within 30 days 3 = 95% of valid invoices paid within 30 days of invoice date 4 = 97% of valid invoices paid within 30 days 5 = 100% of valid invoices paid within 30 days	<ul style="list-style-type: none"> Group Finance Payment of Invoices analysis Report Sign off by EH: POCM
People Management and Empowerment (Compulsory)						
2	Skills Development	2.1	% Implementation of skills development initiatives for Cou employees	100%	1 < 80% (Establishment of Departmental Training Committee) 2 = 80% (Development and sign off a Departmental Workplace Skills Plan) 3 = 85% Implementation (of Departmental Workplace Skills Plan ¹⁷) 4 = 90% implementation (of Departmental Workplace Skills Plan and	<ul style="list-style-type: none"> Terms of Reference, Minutes, Agendas for the Training Committee; Signed Compliant WSP Annual Training Reports reflecting status and levels trained.

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¹⁶ By paying service provider within required 30 days, there will be a reduction or elimination of unnecessary auditing findings which will lead to improved control environment within SCM and City as a whole. Each department must ensure that submission of invoices to Group Finance are not delayed. The Finance Manager must ensure that the invoice meets all requirements and all relevant attachments are submitted with the invoice to avoid it being rejected by the Merchants thereby causing a delay in the payment. The department is liable for this compliance.

¹⁷ General training to improve skills including Individual Learning Plans trainings.

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KPA	Key Performance Areas (KPAs)	KPI No	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
3	Performance Management	3.1	% Compliance to the performance management cycle as per the policy for employees of the CoJ ¹⁸ in the department	51.92%	all competency gaps identified in the skills audits including for level 5 – 6 employees ¹⁹ 5 = 95% implementation (of all competency gaps identified in the skills audits including for level 5 – 6 employees) 1 = <65% 2 = 65% - 84% 3 = 85% - 100% 4 = 100% compliance, up to 50% of employees achieved 3.1 or more on their set targets 5 = 100% compliance, more than 50% of employees achieved 3.1 or more on their set targets	Assessment report by GCSS
		3.2	% Establishment of the Departmental Performance Management Moderation Committee	New indicator	1 = < 65% (Draft TORs in place) 2 = 66% - 84% (Approved TORs) 3 = 85% - 100% (Committee members appointed and induction meeting held) 4 = First (or midyear) assessment done 5 = Final assessment done	
		3.3	Percentage of disciplinary cases resolved within 120 days ²⁰	No cases	1 = >75% 2 = 75 - 80% 3 = 81 - 85% 4 = 86 - 90% 5 = 90 - 100%	<ul style="list-style-type: none"> Appointment letters of Prosecutor and Presiding Officer Disciplinary sanction GCSS Assessment report
4	Employee safety	4.1	Percentage compliance to SHE Policy/ Directives to promote health and safety in the department ²¹	60%	1 = 40% compliance to SHE audits 2 = 60% compliance to SHE audits 3 = 80% - 89% compliance to SHE	Quarterly assessment reports by SHELA & FCM tabled at EMT

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¹⁸ This is specific to outcomes of the skills audits conducted. The HoD must ensure that employees within the department comply and participate as per the GCSS programme.
¹⁹ This is performance for the entire staff complement in the department unless specified otherwise for departments with very large numbers of employees.
²⁰ The counting begins with the charge (charge sheet date) laid on the employee up to the day of approval by the Chairperson and committee, of the recommended disciplinary action to be implemented.

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KPA	Key Performance Areas (KPAs)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
					audits 4 = 90% - 94% compliance to SHE audits 5 = 95% - 100% compliance to SHE audits	
5	Human Capital Management and Empowerment	5.1	% Compliance with the implementation of EE in departments (including gender and disability) ²²	100%	Change Management (optional) 1 < 40% ²³ 2 = 40% - 59% ²⁴ 3 = 60% - 79% ²⁵ 4 = 80% - 99% ²⁶ 5 = 100% ²⁷	<ul style="list-style-type: none"> Approved EE Plan; Quarterly Progress reports by EE Unit tabled at EMT Close out report
6	Disability Mainstreaming	6.1	% Attraction of suitably qualified People with Disabilities (PWDs)	New	1 = 0% - 19% ²⁸ 2 = 20% - 45% ²⁹ 3 = 46% - 79% ³⁰	<ul style="list-style-type: none"> Training Manuals & Presentations Signed Quarterly Progress reports

1.2

²¹ This relates to prevention of workplace incident classified as disabling injuries and fatalities by Group SHE. The department to provide the following documents to Group SHE to determine the compliance level of the department

- I. List of employees attended training for SHE representatives' course, First Aids, Evacuation Marshalls, and Fire Fighting
- II. Minutes confirming employees attending SHE Committee meeting
- III. Progress report on the implementation of the recommended corrective measures
- IV. SLA with JPC to address repairs and maintenance matters of the building
- V. List of employees referred to Group SHE for pre-employment medical examination, periodic and exit medical examination
- VI. Reporting of injury on duty cases/claims to COVID office within 2 days after the incident
- VII. List of employees provided with Personal Protective Equipment
- VIII. Reporting of employees tested positive for COVID-19
- IX. Reporting of employees vaccinated for COVID-19
- X. Confirmation of provision desk screen to maintain social distancing

²² The department is required to develop an action plan to guide implementation through which it will be measured.

²³ Create awareness to all employees on EE, Gender and Disability issues, establish functional EE, Disability and Gender structures and the develop 2019-2024 departmental EE Plan;

²⁴ Implementation of numerical targets (Race, Gender and Disability) and non-numerical targets (Affirmative Action measures) as stipulated in the Departmental EE Plan;

²⁵ Quarterly progress reports on the implementation of EE, Disability and Gender in the department (Monitoring and Evaluation of progress made);



²⁶ Integration of EE and training to affirm employees from the designated group to address identified gaps; and

²⁷ Develop integrated and coordinated transformational activities.

²⁸ Identify position targeted for suitably qualified PWDs across occupational levels i.e., from Unskilled to Senior Management occupational levels.

²⁹ Awareness creation on Disability to all employees within the department.

B

KPA	Key Performance Areas (KPAs)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
			within departments (including measures to enhance universal access and reasonable accommodation)		4 = 80% - 99% ³¹ 5 = 100% ³²	<ul style="list-style-type: none"> Recruitment reports SAP Reports Memorandum of Understanding (MOU) or Partnership Agreements
Customer Orientation and Customer Focus (Compulsory)						
7	Customer satisfaction levels	7.1	Percentage increase in satisfaction levels ³³	62% (2020/21 QoL)	1 = decrease. 2 = no change or <1% increase. 3 = 1% increase. 4 = 2% increase. 5 = > 2% increase.	Satisfaction results
<p>By signing this performance scorecard, the manager and employee hereby indicate their full understanding of, and agreement with the contents of the scorecard. The manager and the employee both acknowledge that this is in full compliance with the City's Performance Management Policy.</p>						
Thanduxolo Mendrew Group Head: CRUM			Signature: 	Floyd Brink City Manager	Signature: 	Date: 19 July 2023

1.2

³⁰ 0 – 1% of total staff compliment as an improvement to the minimum 2% Disability target

³¹ >1% of total staff compliment as an improvement to the minimum 2% Disability target

³² Partnership with external organisation to recruit disabled learners or to improve on workplace accessibility

³³ Every two years the Quality of Life survey is conducted in partnership with GCRO and GPG; and in alternate years a Customer Satisfaction Survey is carried out by COJ with a private sector service provider. 2021/22 (Customer satisfaction survey), 2022/23 (Polling survey) 2023/24 (Quality of Life survey), 2024/25 (Customer satisfaction survey) 2025/26 (Quality of Life survey). An action plan for implementation will be developed following the finalisation of survey results.